To gardians

Please let us know if you change your job.

Notes: If there are any untrue statements on the certificate, your child's admission and daycare practice will be canceled.

⟨Blanks for gardians⟩

児童名(Child's name)	生年月日 (Date of birth)	保育施設名 (Nursery name)

To whom it may concern

See the examples on the back and fill out this form with ball-point pen in all block letters. We will call or visit your office to confirm the certificate. Thank you for your cooperation.

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I hereby ce	ertity t	hat the er	nploye	e (has bee	en emplo	yed / w	vill be er	mployed)	as r	mentioned	belov	W.				
/		/		(MM/ DD	/ YYYY	·)	Office	address								
Name of th	ne pers	son who w	rote th	is form			Office	e name								
				STA	MP	١	Name of	employe	r						ST	AMP
•The Certi	ficate	without da	ate of i	ssue and s	stamp or	signatu	ure is in	valid.								
Employe name						oloyee's dress										
Date of er	mployr	nent		/	/			(month/	day .	/ year)						
Expiry conf	date d		spect	/ of continue	/ ous emp	loyment			exp	ired of co	ntrac	t.)				
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Office nar	ne							Office a	ddre	ss:						
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Descr	ription	of job						<u> </u>								
(Writ	e in d	etail)														
Туре о	f worki	ng time					Fixed s	shift	/	Rotati	ng sh	ift				
Working	From	aı	m. / pm.	/ pm. To am.			ı. / pm. Total () ho			Social insurance (Ye					/ 1	No)
hours ∙Total	From	aı	n. / pm.	То	ar	am. / pm. Total () hours With			olding slip	(Yes	/ 1	No)
hours include	From	aı	n. / pm.	pm. To am.			. / pm. Total () ho			ours Pay statement (Yes	/ 1	No)
breaks.	Rotatin	g shift: Total v	vorking h	ours per week	(including	horading breaks)					hours Attendance book (Yes					No)
The number		(basic) •Circle t	he woı	da rking days	ays/per (Mon		or e. We	d. Thu	1.	days/pe Fri. Sa	er we					
How to c	ommut	e to work	by c	ar / bus	/ walk	/ Oth	ner() Co	mmut	ting distance	((Oneway)				km
Salary	Ва	sic pay of	month	ıly (·	yen) /	/ Daily	wage(yen) /	hourly wage	(yen)
•Write the				/	Days wo	Days worked		day	ys	/		Days worked				days
working da months.	working days in last six months.		(YY	(YYYY / MM)		Total pay		yer	n	(YYYY/ M	(MM	Total pay				yen
*If the employee is on the maternity leave, write the situation before that.				/ Days worked (YYYY / MM) Total pay			days			/		Days worked				days
			(YY					yer	n	(YYYY/ M	(YYYY/ MM) Total pay					yen
•Total pay includes taxes and				Days		Days worked Total pay		day	days			Days worked				days
other reductions except the transport allowance.		(YYYY / MM)		Total	yen			(YYYY/ M	MM) Total pay					yen		
Period of maternity leav		ve	From	/		/	(MN	// D	D / YYYY) To	/		/			
Period	of chi	d-care lea	ive	From	/		/	(MN	// D	D / YYYY) To	/		/		
Date o	f retur	ning to wo	ork		/		/		(M	IM/ DD /	YYYY	′)				
<for officia<="" td=""><td>al use</td><td>only></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></for>	al use	only>														

調	査	日	調	査	員	担当者(相手)	調	査	確	認	内	容	

Blanks for office



To whom it may concern

We use this application only for entering nursery.

We will call or visit your office to confirm this certificate.

Thank you for your cooperation.

[Notes]



- This certificate must be written by the employer.
- •To make corrections, write double line there and put your stamp.
- •When the date of issue on the certificate is before the hiring date, it will be invalid. (Excepting prospective emplyees)
- If there are any untrue statements on the certificate,
- •the employee's child's admission and daycare practice will be canceled.
- •Please make sure to write the number of days the employee worked in last six months.

Please see the notes below and fill out all blanks.

If you have any questions, please contact us.



≪Contact information≫

Ginowan city nursery school section Tel 098-893-4411 Extension 3312 • 3313



[Working hours] Write a base basic working hours on the contract. (including

contract. (including breaks and excepting over time.)

(Rotating shift)

①Write total working hours per week including breaks.

②Write usual working time and total working hours per week.

If the employee has more than four shift patterns, please attach the shift schedule.

【The number of working days】

Write basic number of working days per month on the contract,

If the employee works in some rotating shifts, write avarage days per week or month. The certificate without date of issue, date of employment, expiry date of contract and stamp or signature is invalid.

[Office address]

If the employee is hired by staffing company for other company and location,

①Write staffing company name and address above. ②Write the company name, address and phone number that employee actualy works.

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oloyee's	name				Employe										
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alary		Basic pay	of mo	nthly (yen) / [Daily	wage(yen)	/	hourly wage(_	
		r of working		/	Days worked				days	/		Days worked		day	
lays in	last six	months.	(Y)	(YY / MM)	Total pay				yen	(YYYY/ I	MM)	Total pay		yen	
		is on the		/	Days worked			_	days	/		Days worked		day	
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[Salary]

Please write basic pay per month, daily wage or weekly wage.

(Number of working days in last six month)

1 Days worked

→Including paid holidays

2Total pay

→Excepting any bonus.

③If the employee works less than six month, fill out the blanks as much as possible.

[Maternity leave and Child-care leave]
If the employee is in the maternity leave or child-care leave, please make sure to fill out these blanks and date of returning to work.