

Certificate of Employment

To: Mayor of Minato City Director of Minato City Public Welfare Office

- * Note: Please have this certificate prepared by the business where the parent/guardian is employed. This certificate should not be filled in by the parent/guardian themselves. (No seal required)
- * This form must be completed by the employer or business owner. If any corrections are made, those places must be marked with the seal of the person making the correction.
- * Please fill out the form accurately as it is an important document for the paperwork needed for child's beginning and continuing enrollment. The person who filled out the form may be contacted if there are any questions.
- * If your work schedule is irregular, please describe it in the remarks column or attach a separate sheet.
- * If any false information is found in the application, the application will be invalidated (and the child will be dismissed from the nursery school).
- * If the applicant is registered as a dispatched worker, a certificate of employment from the company where the applicant is dispatched may also be required.

Certification Date: / / (YYYY/MM/DD)

Name of business

Name of representative

Address

Phone number - -

Name of person in charge

Contact person's phone number - -

Please direct any inquiries to the applicable Regional City Office (Health and Welfare Subsection, Residents Support Section): Shiba (3578) 3161, Azabu (5114) 8822, Akasaka (5413) 7276, Takanawa (5421) 7085, Shibaura Konan (6400) 0022

* If the applicant fills in or alters the contents of this certificate without the permission of the employer, the applicant may be subject to criminal charges under the criminal law.

No.	Item	Description
1	Industry	<div><div><input type="checkbox"/> Agriculture, Forestry</div><div><input type="checkbox"/> Fisheries</div><div><input type="checkbox"/> Mining, quarrying, gravel extraction</div><div><input type="checkbox"/> Construction</div><div><input type="checkbox"/> Manufacturing</div><div><input type="checkbox"/> Electricity, gas, heat supply, water supply</div><div><input type="checkbox"/> Information and communications services</div><div><input type="checkbox"/> Transportation, postal services</div><div><input type="checkbox"/> Wholesale, retail</div><div><input type="checkbox"/> Financial, insurance</div><div><input type="checkbox"/> Real estate, goods rental and leasing business</div><div><input type="checkbox"/> Academic research, professional, technical services</div><div><input type="checkbox"/> Lodging, food services</div><div><input type="checkbox"/> Lifestyle-related services, entertainment</div><div><input type="checkbox"/> Medical care, welfare</div><div><input type="checkbox"/> Education and learning support</div><div><input type="checkbox"/> Complex service business</div><div><input type="checkbox"/> Public service</div><div><input type="checkbox"/> Other ()</div></div>
2	Name in katakana	
	Name of employee	Date of birth / / (YYYY/MM/DD)
3	Period of employment (planned)	<div><div><input type="checkbox"/> Indefinite</div><div><input type="checkbox"/> Fixed-term</div></div> <div>(In the case of an indefinite term, please only provide the start date of employment)</div> <div>From / / to / / (YYYY/MM/DD)</div>
4	Principal place of employment	<div>Name</div> <div>Address</div>
5	Type of employment	<div><input type="checkbox"/> Full-time employee</div> <div><input type="checkbox"/> Part-time employee</div> <div><input type="checkbox"/> Temporary employee through temp agency</div> <div><input type="checkbox"/> Contract employee</div> <div><input type="checkbox"/> Employee appointed for fiscal year</div> <div><input type="checkbox"/> Non-regular employee, temporary employee</div> <div><input type="checkbox"/> Executive</div> <div><input type="checkbox"/> Self-employed person</div> <div><input type="checkbox"/> Relative employed by a resident</div> <div><input type="checkbox"/> Family business employee</div> <div><input type="checkbox"/> Working at home</div> <div><input type="checkbox"/> Outsourced</div> <div><input type="checkbox"/> Other ()</div>

14	Will the employment contract be renewed after the contract expires?	<input type="checkbox"/> Yes <input type="checkbox"/> Yes (planned) <input type="checkbox"/> No <input type="checkbox"/> Undecided			
15	Can the childcare leave be shortened upon the child's enrollment?	<input type="checkbox"/> Yes <input type="checkbox"/> Yes (planned) <input type="checkbox"/> No			
16	Can the childcare leave be extended?	<input type="checkbox"/> Yes <input type="checkbox"/> Yes (planned) <input type="checkbox"/> No			
17	Duration of one parent or guardian living away from home to work (including planned period)	From / / to / / (YYYY/MM/DD)			
18	Remarks				
19	parent/guardian's entry column	Child name	Date of birth (YYYY/MM/DD)	Facility	<input type="checkbox"/> In use <input type="checkbox"/> Currently applying (first choice)
			/ /		
		Child name	Date of birth	Facility	<input type="checkbox"/> In use <input type="checkbox"/> Currently applying (first choice)
			/ /		
		Child name	Date of birth	Facility	<input type="checkbox"/> In use <input type="checkbox"/> Currently applying (first choice)
			/ /		



Required information