

Application for FY2026 'Certificate of
Approved Classification for Education and Childcare' and Enrollment Facility-
type Benefits / Community-type Childcare Benefits

Date (YYYY/MM/DD): _____

To the Mayor of Matsudo City Please obtain your
application number here ⇒
Matsudo City Online Application System



Application Number obtained through online pre-application ※Required

I hereby apply for nursery school benefits and nursery school enrollment for my child.

| | | | | |
|--|--|------------------------|---|---|
| Address | Matsudo City, | | | |
| Address as of 1/1/2025 | Father <input type="checkbox"/> Within Matsudo / <input type="checkbox"/> Other city () | Address as of 1/1/2026 | Father <input type="checkbox"/> Within Matsudo / <input type="checkbox"/> Other city () | |
| | Mother <input type="checkbox"/> Within Matsudo / <input type="checkbox"/> Other city () | | Mother <input type="checkbox"/> Within Matsudo / <input type="checkbox"/> Other city () | |
| Phone Number | (Home) | (Father) | (Mother) | |
| Names of parents/ guardians | Name | Relation to child | Date of birth | (1st line) Occupation/School (2nd line) Individual "My Number" |
| | | | (YYYY/MM/DD) | |
| | | | (YYYY/MM/DD) | |
| Name of the child | | Gender | | Individual Number (My Number) |
| | | M · F | | |
| Applicant's need for childcare services (Check one) | <input type="checkbox"/> Yes Requesting childcare services at a nursery school due to parent/guardian employment or sickness, etc. (Also applicable if you are simultaneously applying for kindergartens, etc.) | | | |
| | <input type="checkbox"/> No Planning to attend a kindergarten, etc. (Not applying for nursery school childcare services at this time) | | | |

<Information regarding members of the household>

| | | | | |
|--|------|-------------------|---------------|-------------------|
| People who live the same household (that are not mentioned above) | Name | Relation to child | Date of birth | Occupation/School |
| | | | (YYYY/MM/DD) | |
| | | | (YYYY/MM/DD) | |
| | | | (YYYY/MM/DD) | |
| | | | (YYYY/MM/DD) | |
| | | | (YYYY/MM/DD) | |

<Desired childcare period and nursery school preferences> ※ Please see page 22 through 27 of the "Guide", or scan the QR code on the bottom-right of this sheet in order to fill the facility name and number precisely.

| | | | | | | |
|---|-----------------------------------|-----|----------------|-------------|-----|----------------|
| Period that childcare services are needed | From (YYYY/MM/DD) to (YYYY/MM/DD) | | | | | |
| Names of the nursery schools you wish to apply to | Name | No. | Visit | Name | No. | Visit |
| | 1st choice | | Done / Not yet | 6th choice | | Done / Not yet |
| | 2nd choice | | Done / Not yet | 7th choice | | Done / Not yet |
| | 3rd choice | | Done / Not yet | 8th choice | | Done / Not yet |
| | 4th choice | | Done / Not yet | 9th choice | | Done / Not yet |
| | 5th choice | | Done / Not yet | 10th choice | | Done / Not yet |

※If you have more than 10 preferences, please write all additional details on a separate A4-size piece of paper
※If you are simultaneously applying for nursery schools in Matsudo and nursery schools in other cities, you will need to submit one application form for each municipality.
※We will continue to adjust admissions during the same fiscal year (until March 2027), even after your desired month of the start childcare. If you wish to continue applying for childcare admission in the following year, you will need to re-
※If you list a facility that does not meet the age eligibility requirement, it will be automatically removed from your list.

List of
facility
name &
No.



| | | |
|------------------------------------|--|---|
| Applicant's reason(s) | ※Check all applicable boxes | |
| | Father | Mother |
| | <input type="checkbox"/> Employment <input type="checkbox"/> Job-seeking <input type="checkbox"/> Sickness, Disability <input type="checkbox"/> Providing nursing/long-term care for a family member <input type="checkbox"/> Schooling (incl. job-training) <input type="checkbox"/> Recovering after a disaster <input type="checkbox"/> Not living together <input type="checkbox"/> Other () | <input type="checkbox"/> Employment <input type="checkbox"/> Job-seeking <input type="checkbox"/> Sickness, Disability <input type="checkbox"/> Providing nursing/long-term care for a family member <input type="checkbox"/> Pregnancy or childbirth (Due date: / /) <input type="checkbox"/> Schooling (incl. job-training) <input type="checkbox"/> Recovering after a disaster <input type="checkbox"/> Not living together <input type="checkbox"/> Other () |
| Days & Hours of request | Weekdays | Hours required |
| | M · T · W · Th · F | : ~ : |
| Saturday childcare | Yes · No | : ~ : |

※Please note that nursery school hours are shorter on Saturdays.

※ I hereby acknowledge that the City may access my personal details (such as my 'Citizen's Tax Record', status re. the 'Receipt of Public Assistance/Child-rearing Allowance', and 'Disability Certificate' status, etc.) for the purpose of coordinating my use of childcare services and settling any late payments of childcare fees, etc. using my Individual "My Number".

I also agree to share necessary information (such as the amount and breakdown of any late payment, place of work, income, bank account, etc.) with the relevant department in order to recover any outstanding or unpaid childcare fees, etc.

Guardians' signatures (in print) ※Required

Year / Month / Day

Father: _____

Mother: _____

※The application number is necessary when applying in person or by mail.

Please double-check that you have written the application number on the upper right corner on the front.

You can obtain the application number through the Matsudo City Online Application System's pre-application process.

Application for FY2026 'Certificate of
Approved Classification for Education and Childcare' and Enrollment Facility-
type Benefits / Community-type Childcare Benefits

Date (YYYY/MM/DD): 2025/11/1

To the Mayor of Matsudo City Please obtain your
application number here ⇒
Matsudo City Online Application System



Application Number obtained through online pre-application ※Required

0123456

I hereby apply for nursery school benefits and nursery school enrollment for my child.

| | | | | |
|---|--|---------------------------------------|---|---|
| Address | Matsudo City, Nemoto 387-5 | | | |
| Address as of 1/1/2025 | Father <input type="checkbox"/> Within Matsudo / <input checked="" type="checkbox"/> Other city (○○ City) | Address as of 1/1/2026 | Father <input checked="" type="checkbox"/> Within Matsudo / <input type="checkbox"/> Other city () | |
| | Mother <input type="checkbox"/> Within Matsudo / <input checked="" type="checkbox"/> Other city (○○ City) | | Mother <input checked="" type="checkbox"/> Within Matsudo / <input type="checkbox"/> Other city () | |
| Phone Number | (Home) 047-123-4567 (Father) 090-123-4567 (Mother) 090-123-4567 | | | |
| Names of parents/guardians | Name | Relation to child | Date of birth | (1st line) Occupation/School (2nd line) Individual "My Number" |
| | たろう まつど Taro Matsudo | Father | 1986/ 01/ 01 (YYYY/MM/DD) | Business Person 1 2 3 4 5 6 7 8 4 3 2 1 |
| | はなえ まつど Hanae Matsudo | Mother | 1987/02/01 (YYYY/MM/DD) | Business Person 5 6 7 8 9 1 2 3 4 5 6 7 |
| Name of the child | はなこ まつど Hanako Matsudo | Gender | 2020/04/02 (YYYY/MM/DD) | Individual Number (My Number) |
| | | M・ <input checked="" type="radio"/> F | | 9 8 7 6 5 4 3 1 0 8 7 6 |
| Applicant's need for childcare services (Check one) | <input checked="" type="checkbox"/> Yes Requesting childcare services at a nursery school due to parent/guardian employment or sickness, etc. (Also applicable if you are simultaneously applying for kindergartens, etc.) | | | |
| | <input type="checkbox"/> No Planning to attend a kindergarten, etc. (Not applying for nursery school childcare services at this time) | | | |

<Information regarding members of the household>

| | | | | |
|---|---------------------------|-------------------|----------------------------|---|
| People who live the same household (that are not mentioned above) | Name | Relation to child | Date of birth | Occupation/School |
| | じろう まつど Jiro Matsudo | Brother | 2015/05/01 (YYYY/MM/DD) | Matsudo City Elementary School, 5th grade |
| | まつこ ねもと Matsuko Nemoto | Grand Mother | 1956/03/01 (YYYY/MM/DD) | Unemployed |
| | | | (YYYY/MM/DD) | |
| | | | (YYYY/MM/DD) | |

<Desired childcare period and nursery school preferences> ※ Please see page 26 through 47 of the "Guide", or scan the QR code on the bottom-right of this sheet in order to fill the facility name and number precisely.

| | | | | | | |
|---|--|-----|--|------------------------------|--------------------------|--|
| Period that childcare services are needed | From (YYYY/MM/DD) 2026/04/01 to (YYYY/MM/DD) | | | | | |
| Names of the nursery schools you wish to apply to | Name | No. | Visit | Name | No. | Visit |
| | 1st choice Kitamatsudo | 1 | <input checked="" type="radio"/> Done <input type="radio"/> Not yet | 6th choice ○○ Hoikushitsu | <input type="checkbox"/> | <input checked="" type="radio"/> Done <input type="radio"/> Not yet |
| | 2nd choice Koganehara Hoikusho | 4 | <input checked="" type="radio"/> Done <input type="radio"/> Not yet | 7th choice ○○ Hoikuen | ◎◎ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet |
| | 3rd choice ○○ Hoikuen | △△ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet | 8th choice ○○ Room | ▽▽ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet |
| | 4th choice ○○ Hoiku Room | ☆☆ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet | 9th choice ○○ Hoikuen | ◇◇ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet |
| | 5th choice ○○ Hoikuen | ▲▲ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet | 10th choice ○○ Room | ★★ | <input checked="" type="radio"/> Done <input type="radio"/> Not yet |

※If you have more than 10 preferences, please write all additional details on a separate A4-size piece of paper
※If you are simultaneously applying for nursery schools in Matsudo and nursery schools in other cities, you will need to submit one application form for each municipality.
※We will continue to adjust admissions during the same fiscal year (until March 2027), even after your desired month of the start childcare. If you wish to continue applying for childcare admission in the following year, you will need to re-
※If you list a facility that does not meet the age eligibility requirement, it will be automatically removed from your list.

List of facility name & No.



※Please note that nursery school hours are shorter on Saturdays.

I also agree to share necessary information (such as the amount and breakdown of any late payment, place of work, income, bank account, etc.) with the relevant department in order to recover any outstanding or unpaid childcare fees, etc.

※The application number is necessary when applying in person or by mail.
Please double-check that you have written the application number on the upper right corner on the front.
You can obtain the application number through the Matsudo City Online Application System's pre-application process.