

Application for '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 fill out

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

Address	Matsudo City,		
Address as of 1/1/2020	<input type="checkbox"/> Within Matsudo City <input type="checkbox"/> Other city()	Address as of 1/1/2021	<input type="checkbox"/> Within Matsudo City <input type="checkbox"/> Other city()
Phone Number	(Home)	(Father)	(Mother)
Names of parents/guardians	Name	Relation to child	Date of birth (YYYY/MM/DD)
			(1st line) Occupation/School (2nd line) Individual "My Number"
Name of the child		Gender M · F	Individual Number (My Number) (YYYY/MM/DD)
Applicant's need for childcare services (Circle 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 (YYYY/MM/DD)	Occupation/School
			(YYYY/MM/DD)	
			(YYYY/MM/DD)	
			(YYYY/MM/DD)	
			(YYYY/MM/DD)	
			(YYYY/MM/DD)	

<Desired childcare period and nursery school preferences>

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	Visit	Name	Visit
	1st choice	Done / Not yet	5th choice	Done / Not yet
	2nd choice	Done / Not yet	6th choice	Done / Not yet
	3rd choice	Done / Not yet	7th choice	Done / Not yet
	4th choice	Done / Not yet	8th choice	Done / Not yet

※If you have more than 8 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.

Applicant's reason(s)	Days & Hours required	
	Weekdays	Saturday childcare
<input checked="" type="checkbox"/> Employment (incl. job-seeking), Schooling (incl. job-training) <input type="checkbox"/> Sicknes, Disability <input type="checkbox"/> Pregnancy or childbirth (Due date YYYY/MM/DD :) <input type="checkbox"/> Providing nursing/long-term care for a family member <input type="checkbox"/> Recovering after a disaster <input type="checkbox"/> Other ()	M · T · W · T · F	Yes · No
Hours required	9 : 00 ~ 18 : 00	

※Please note that nursery school hours are shorter on Saturday

※I hereby acknowledge that the City may use my individual "My Number" to access my personal details, such as my 'Citizen's Tax Record', status re. the 'Receipt of Public Assistance/Child-rearing Allowance', 'Handbook for the Physically Disabled', etc., in order to confirm my need for childcare services.

Guardians' signatures (required) Year 2020 /Month 11 /Day 2	Father: Taro Matsudo Mother: Hanae Matsudo	Print: Taro Matsudo Print: Hanae Matsudo
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Please check below for the necessary documents before submitting application

[Checklist for the Guardian]

Please check in the box

Necessary application documentation	
<input checked="" type="checkbox"/>	① Identification documents (i.e. My Number Card, etc.) ※Please refer to page 18 of "FY2021 Guide to Nursery School Admissions" 1. Documents to prove My Number 2. Documents to prove identity
<input checked="" type="checkbox"/>	② Application for 'Certificate of Approved Classification for Education and Childcare' and Enrollment Facility-type Benefit / Community-type Childcare Benefit (this form) ※One form is required for each child applying
<input checked="" type="checkbox"/>	③ Family Background Report ※One form is required for each child applying
<input checked="" type="checkbox"/>	④ Child's Health Report ※One form is required for each child applying
<input checked="" type="checkbox"/>	⑤ Terms of Agreement for Admission to Nursery Schools, Small-scale Childcare Services, and Centers for Early Childhood Education and Care
<input checked="" type="checkbox"/>	⑥ Documentation proving the need for childcare assistance (Required for all adults 18-65 years who reside in the same household) ※Please refer to page 3 of "FY2021 Guide to Nursery School Admissions"

<input checked="" type="checkbox"/>	Documentation required dependent upon personal circumstances
<input checked="" type="checkbox"/>	Please refer to page 4 of "FY2021 Guide to Nursery School Admissions"

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

To the Mayor of Matsudo City

Please fill out

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

Address	Matsudo City, Nemoto 387-5	
	Address as of 2020.1.1	<input checked="" type="checkbox"/> Within Matsudo City <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"	Individual Number																																
				Taro Matsudo					Hanae Matsudo					Hanako Matsudo																						
	Father	1986/01/01	Office Worker	1	2	3	4	5	6	7	8	9		Mother	1987/02/01	Office Worker	5	6	7	8	9		M	1987/04/02	9	8	7	6	5	4	3	1	0	8	7	6

<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
Jiro Matsudo	Brother	2009/05/01	Matsudo Elementary School 3rd Grade
Matsuko Nemoto	Grand Mother	1956/03/01	Unemployed

<Desired childcare period and nursery school preferences>

Period that childcare services are needed	From (YYYY/MM/DD) 2021/4/1 to (YYYY/MM/DD) 2027/3/31
Names of the nursery schools you wish to apply to	
1st choice	ABC Nursery School
2nd choice	Matsudo Kita Nursery School
3rd choice	Sunny Hill Kids Room
4th choice	Apple Tree Kodomoen

*If you have more than 8 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.

Family Background Report

< Form 2:様式2 >

1) Current childcare situation

- Either the mother or father, who is currently seeking employment, takes care of the child
- Either the mother or father, who is on a parental leave, takes care of the child
Planned return-to-work date (YYYY/MM/DD) - _____
- Either parent brings along their child when they go to work (outside of the home)
- Grandparents, other relatives, or acquaintances take care of the child
- Either parent takes care of their child while self-employed or working from home
- Using a kindergarten, non-registered or employer-provided childcare facility
Name of the facility _____
Since when (YYYY/MM/DD) - _____
Days in use (days per week / days per month)
Hours in use (From _____ : _____ to _____ : _____)
- Other (_____)

2) Is the mother currently pregnant?

- Yes No
- ↳ Estimated date of delivery (YYYY/MM/DD) - _____

3) Grandparents' situation

		Name	Age	Address (if different to the child)	Live together		Other		Employed
Paternal	Grand-father				Yes	No	Deceased	Cannot contact	Y / N
	Grand-mother				Yes	No	Deceased	Cannot contact	Y / N
Maternal	Grand-father				Yes	No	Deceased	Cannot contact	Y / N
	Grand-mother				Yes	No	Deceased	Cannot contact	Y / N

※The grandparents/any relatives who are under the age of 65 and live in the same household (or live on the same premises) as the child must also submit documentation to prove their reasons for requiring childcare services, just as the parents. If this is not received, the childcare support at home will be considered available.

4) Commuting time and method of transportation

Father	hr(s). and min./each way	Train · Bus · Car · Motorcycle · Bicycle · On foot
	(Route) The house →	
Mother	hr(s). and min./each way	Train · Bus · Car · Motorcycle · Bicycle · On foot
	(Route) The house →	
Example	(Route) The house → Bicycle → JR Matsudo sta. → JR Shinmatsudo sta. → On foot → Office	

5) The primary person who will drop-off/pick-up the child at nursery school

Father · Mother · Grandfather · Grandmother · Other (_____)

6) In the case that admission is not granted

- The mother or the father will take care of the child The mother/father will take the child to work
- Grandparents, other relatives, or acquaintances will take care of the child
- Extension of parental leave (until / /). Other (_____)


7) In the case of applying simultaneously with another child (brothers/sisters)

- ① If admission is not granted for all the children
 - Wish to enroll even if only the child on this application is admitted
※Note: that child still needs to meet childcare requirements
 - Do not wish to enroll unless all the children are admitted

- ② If admission is granted for all the children
 - Wish to enroll in the facility that is high on my list of choices even if the siblings are put in different facilities
 - Wish to enroll all the children in the same facility, even if the facility is further down in my list
* Checking this does not promise they will be in the same facility
 - Do not wish to enroll unless all the children can be in the same facility

8) Do you plan to extend your parental leave period?

Yes No

 If you answered "Yes",
the date you really wish to start childcare is (YYYY/MM/DD) _____ / To be determined

- ※ Leave this section blank if you would like your application to be assessed as a regular application.
- ※ Please contact us before the deadline if you change the desired starting date.
- ※ You will need to re-submit the application in case your desired start date of childcare is later than next fiscal year.

CHILD'S HEALTH REPORT

Fill-in Date: _____

Name of the child _____ year(s) and _____ months old Date of birth _____
(as of fill-in date)

Birth Conditions	Condition at birth	<input type="checkbox"/> Normal	<input type="checkbox"/> Premature	<input type="checkbox"/> Incubation	<input type="checkbox"/> Asphyxia	<input type="checkbox"/> Other ()
	• Weight at birth () g • Gestation period () weeks • Baby's condition	<input type="checkbox"/> Normal	<input type="checkbox"/> Abnormal			
	⇒ Current height () cm & weight () kg	Diagnosis ()				
	⇒ Type of nutrition	<input type="checkbox"/> Breast milk	<input type="checkbox"/> Mix	<input type="checkbox"/> Baby formula		
		<input type="checkbox"/> Baby food (times/day : stage 1•2•3)	<input type="checkbox"/> Regular food			
Health Condition	Record of health checkups	<input type="checkbox"/> No problem	<input type="checkbox"/> Point noted/observation-needed ()			
	• Health checkups received ⇒	<input type="checkbox"/> 1 mo.	<input type="checkbox"/> 3-4mo.	<input type="checkbox"/> 6-7mo.	<input type="checkbox"/> 9-10mo.	<input type="checkbox"/> 1yr. <input type="checkbox"/> 18mo. <input type="checkbox"/> 3yr.
	• Does your child go to a hospital/facility for congenital/chronic diseases or developmental counseling?	<input type="checkbox"/> No	<input type="checkbox"/> Yes ⇒ Why? () Name of facility ()			
	⇒ Receiving treatment () , medication (<input type="checkbox"/> Yes <input type="checkbox"/> No), how often? (times/week • month • year)					
	• Has your child had any major illnesses? (at yr, mo. old), name () , medical facility ()					
	• Held his/her head steady (at mo. old / not yet) • Sat without support (at mo. old / not yet)					
	• Started crawling (at mo. old / not yet) • Pulled him/her-self up (at mo. old / not yet) • Started walking (at mo. old / not yet)					
	• Does your child have allergies?	<input type="checkbox"/> No	<input type="checkbox"/> Food <input type="checkbox"/> Asthma <input type="checkbox"/> Atopy <input type="checkbox"/> Other ()			
	⇒ Food allergen () , any past anaphylactic shocks? (times), most recent one (when?)					
	• Has your child ever had convulsions or seizures?	<input type="checkbox"/> No	<input type="checkbox"/> Yes ⇒ (times), (at yr. mo. old) Cause ()			
• Does your child have a Disability Certificate?	<input type="checkbox"/> No	<input type="checkbox"/> Yes ⇒ <input type="checkbox"/> Physical <input type="checkbox"/> Rehabilitation <input type="checkbox"/> Mental ⇒ Disability grade ()				
Development	Circle Yes or No for each point below to answer whether it applies to your child			0 - 1 yr old graders	2- 5 yr. old graders	
	① Laughts out loud			Yes • No	Yes • No	
	② Responds or looks around when called			Yes • No	Yes • No	
	③ Points to the thing he/she wants			Yes • No	Yes • No	
	④ Understands simple words (i.e. "come here" and "give me", etc.) from the adults			Yes • No	Yes • No	
	⑤ Talks some words with senses (i.e. "mommy" and "yum-yum", etc.)			Yes • No	Yes • No	
	⑥ Uses (or tries to use) a spoon/chopsticks to feed him/her-self			Yes • No	Yes • No	
	⑦ Can understand and follow simple commands, such as "get me ○○", etc.			Yes • No	Yes • No	
	⑧ Speaks 2-word sentences (i.e. "Puppy came" and "I'm hungry", etc.)			Yes • No	Yes • No	
	⑨ Has troubled you with his/her stubbornness, tantrums, and/or screams			No • Yes	No • Yes	
	⑩ Can tell his/her own name in full			Yes • No	Yes • No	
	⑪ Can change clothes on his/her own			Yes • No	Yes • No	
	⑫ Tells (or tries to tell) you what they have experienced			Yes • No	Yes • No	
	⑬ Can play following rules and keeping promises			Yes • No	Yes • No	
	⑭ Has troubled you because he/she is restless, moving around and cannot stay in one place, forcing you to keep an eye on them constantly			Yes • No	No • Yes	
⑮ If group living (i.e. childcare with other children around) raises in your mind any health or developmental concerns for your child, please write them down in detail. (i.e. "My child does not drink/eat other than breast milk.", "He is a picky eater and eats certain food only.", etc.						
Immunizations	Check box for completed vaccinations					
	<input type="checkbox"/> Hib (Haemophilis Influenzae type B)	<input type="checkbox"/> Infant Pneumococcus	<input type="checkbox"/> Rota	<input type="checkbox"/> DPT-IPV(Diphtheria-Pertussis-Tetanus-Imovax Polio)		
<input type="checkbox"/> Japanese Encephalitis 1st term	<input type="checkbox"/> Hepatitis B	<input type="checkbox"/> BCG	<input type="checkbox"/> Chicken Pox			
<input type="checkbox"/> MR (Measles & Rubella) 1st term	<input type="checkbox"/> Mumps	<input type="checkbox"/> MR (Measles & Rubella) 2nd term				

Please contact the Nursery School Admissions Office (047-366-7351) anytime if there are any changes to your child's health condition

Terms and Agreement for Admission to Nursery Schools, Small-scale Childcare Services, and Centers for Early Childhood Education and Care

<様式4:FORM 4>

Check each box on the right after reading and agreeing to the terms stipulated below, and include your signature at the bottom .

1 Admission to/Transfer of Nursery Schools (1) Terms of application for nursery school admission		<input checked="" type="checkbox"/>
1	Please check with the desired facility beforehand to understand the contents of their childcare, what expenses they directly collect and which methods of drop-off/pick-up (i.e. car, bicycle, on foot) are allowed, etc. at that facility.	<input type="checkbox"/>
2	You must submit all required documentation by the designated due date, otherwise the application may not be reviewed for admission. Applications must be submitted every fiscal year.	<input type="checkbox"/>
3	The admissions office is to be informed immediately of any changes to the details (e.g. your reasons for requiring childcare, address, family/employment situation, and health condition, etc.) provided in the admissions application. Admissions approval, and the Certificate of Approved Classification for Education and Childcare, may be revoked if the information provided in the application is found to differ from your actual circumstances. In particular, if your reasons for requiring childcare have changed since the time of application (e.g. if you quit your job or if your certificate of residence has been transferred) your application will be re-examined.	<input type="checkbox"/>
4	Requesting support for childcare on the grounds of pregnancy is limited to the period of 2 months before and after the expected month of birth (a maximum of 5 months). A separate application procedure is required to apply for nursery school admissions after this period, even in the case that childcare support is still required.	<input type="checkbox"/>
5	When applying for a nursery school while on parental leave, please note that you are required to return to your previous workplace by the first business day of the month following your child's admission. You must submit a Certificate of Reinstatement promptly after going back to work. If you retire without returning to work after taking parental leave or if your post-leave work style differs from your pre-leave work style, your case will not be considered for reinstatement. In those cases, your child may be withdrawn from the nursery school or your admissions approval may be revoked.	<input type="checkbox"/>
1 Admission to/Transfer of Nursery Schools (2) Terms to note after nursery school admission		
1	You must submit a Notice of Change document if there have been any changes to the information provided in the initial application documents. If your reasons for childcare support or the hours for which you require childcare have changed, submission of a Notification of Education and Childcare Grant Approval Change is required. Information on the application documents, including the household situation and health conditions are to be shared between the city and the facility.	<input type="checkbox"/>
2	Your child will be withdrawn from the nursery school if there are no longer any substantial grounds for receiving childcare support.	<input type="checkbox"/>
3	Temporary leave from a childcare facility is allowed for up to 2 months from the first day of absence. In principle, nursery school fees will be charged even during this time of leave.	<input type="checkbox"/>
4	You must follow the guidelines that each facility has established, and submit all necessary documentation by the set due date. Your child may be asked to leave the facility if any rules are not observed.	<input type="checkbox"/>
5	If your reason for requesting childcare services at a nursery school is "currently seeking employment," your child will be withdrawn from the nursery school at the end of the third month. Your child can continue to use the nursery school only if there is a legitimate reason for requiring childcare, such as if the caregiver receives an informal job offer, etc., and necessary documents to support this claim can be confirmed. If those documents are not submitted by the end of the second month of the job-seeking period, your childcare services eligibility will be lost.	<input type="checkbox"/>
6	Childcare fees, etc. are calculated according to the taxes paid by the child's household. In the case that the parents are divorced but living in the same household, or live separately but still maintain rights to custody, the tax amounts of both parents will be combined when calculating childcare fees. In the case that the parents are exempt from taxation, childcare fees may be calculated according to the sum of the tax paid by the child's grandparents.	<input type="checkbox"/>
7	In principle, childcare fees are not charged retroactively beyond the fiscal year. However, changes in your household taxes, employment condition, or household situation, etc. within a fiscal year will require an adjustment of childcare fees, so please notify us immediately of any such changes.	<input type="checkbox"/>
8	Late charges may be incurred if childcare fee payments are delayed. Regardless of the amount of money owed, if no payment is received even after the issuance of a Letter of Reminder and a Letter of Demand, your child will be withdrawn from the nursery school and your property may be seized to settle the outstanding payment. Please note that fee payment information is shared between the city and the nursery school.	<input type="checkbox"/>
9	Your child is not allowed to return to the original nursery school once a provisional decision for a transfer is given. If the transfer is no longer necessary, please be sure to cancel the application.	<input type="checkbox"/>
10	Your child may be forced to leave the nursery school if unreasonable demands are continuously made (of which are deemed to interfere with school management).	<input type="checkbox"/>
2 Terms Regarding Your Child's Health (1) After applying for/admission to a nursery school		
1	Be sure to inform us of your child's health conditions (speech/behavioral development, allergy, and illness under treatment, etc.), of whether or not you possess a Certificate of Physical Disability, etc., and of any medical care necessities, etc., truthfully when submitting the application. Inform the childcare facility as well when visiting for a facility tour.	<input type="checkbox"/>
2	Depending on the child's health condition, a review meeting may be held to determine whether or not the child can be admitted. Please note that the city may request you submit a medical certificate, etc. (charges may occur) issued by your child's home-doctor stating it is possible for the child to be cared for in group childcare.	<input type="checkbox"/>
3	Your application will not be accepted if there are inconsistencies between the child's health information provided at the point of application and the doctor's medical statement (including instructions for the medical care).	<input type="checkbox"/>
4	You must notify the admission office when there are significant changes in your child's health. An offer of admission may be revoked if your child's health condition is deemed unsuitable for the group nursing environment.	<input type="checkbox"/>
5	Each nursery school has policies regarding health and the prevention of illness in the group nursing environment. In the case that a caregiver does not observe these policies, the nursery school may decline their child's admission.	<input type="checkbox"/>
2 Terms Regarding Your Child's Health (2) Sharing of information		
1	There are cases where the city must contact a related medical institution (attending doctor) and/or a public health nurse, etc., if the city needs to learn more about the child's health conditions, such as for reviewing the conditions of a disease or contents of medical treatment, etc. for admission assessment and for childcare after admission.	<input type="checkbox"/>
2	If the child regularly visits a facility other than the nursery school, such as a Child Development Center, etc., the city may contact said facility directly as needed to inquire how the child is doing there.	<input type="checkbox"/>
3	There may be cases where the child and the parent will be asked to hold an interview with the city official to discuss the child's health condition in-person before the admission assessment .	<input type="checkbox"/>

4	After making a request for a facility transfer, the child's health history and his/her childcare situations, etc. at the former childcare facility will be shared with the new facility.	<input type="checkbox"/>
2 Terms Regarding Your Child's Health (3) Handling of contagious diseases/infections at nursery schools		
1	If the child or a family member of the child is diagnosed with an infection, report it to the nursery school promptly.	<input type="checkbox"/>
2	In the event that a family member (incl. siblings that are not enrolled in the same nursery school) who lives in the same household as the child is diagnosed with an infection, please take care of the child at home even if the child himself/herself is not infected. Also, the family member who is diagnosed with an infection must refrain from dropping them off/picking them up at the nursery school.	<input type="checkbox"/>
3	Consider home-nursing the child if an infection is prevalent at the nursery school, even if he/she is in good health.	<input type="checkbox"/>
4	After the child has just recovered from an infection, please take him/her to the doctor to receive a certificate to attend nursery school (after the minimum period of time as dictated by the guidelines).	<input type="checkbox"/>
5	When an infection is prevalent at the nursery school, or when there the Puclic Health Center issues notice of infectious disease alert, you may be required to home-nurse your child if he/she has not received a vaccination for the disease in question	<input type="checkbox"/>

I hereby acknowledge that I have read and understood the terms listed above.

Year _____ Month _____ Day _____ Parent's Name (Father) _____ Parent's Name (Mother) _____