

Employment Certificate

To Mayor of Misato City

Date of Certification	YY	MM	DD
Name of company			
Name of employer			
Company president & CEO			
Telephone number		—	—
Name of person in charge			
Telephone number of person in charge		—	—

We hereby certify that the following information is correct.

***Preparing or making any change of the certificate without consent of the employer may constitutes criminal offense.**

No.	Item	Column																																																																								
1	Job category	<input type="checkbox"/> Agriculture, forestry <input type="checkbox"/> Fishery <input type="checkbox"/> Mining and quarrying of stone and gravel <input type="checkbox"/> Construction <input type="checkbox"/> Manufacturing <input type="checkbox"/> Electricity, Gas, Heat supply and Water <input type="checkbox"/> Information and communications <input type="checkbox"/> Transport and postal activities <input type="checkbox"/> Wholesale and Retail trade <input type="checkbox"/> Finance and Insurance <input type="checkbox"/> Real estate and goods rental and leasing <input type="checkbox"/> Scientific research, professional and technical services <input type="checkbox"/> Accomodations, eating and drinking services <input type="checkbox"/> Living-related and personal services and amusement services <input type="checkbox"/> Medical, health care and welfare <input type="checkbox"/> Education, learning support <input type="checkbox"/> Compound services <input type="checkbox"/> Government service <input type="checkbox"/> Others()																																																																								
2	Katakana Name of applicant	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 65%;"></td> <td style="width: 5%;">Date of birth</td> <td style="width: 10%;">YY</td> <td style="width: 10%;">MM</td> <td style="width: 10%;">DD</td> </tr> </table>		Date of birth	YY	MM	DD																																																																			
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3	Employment period	<input type="checkbox"/> Indefinite <input type="checkbox"/> Fixed Start(scheduled) date of work YY MM DD ~ YY MM DD																																																																								
4	Location of workplace	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Name</td> <td></td> </tr> <tr> <td>Address</td> <td></td> </tr> </table>	Name		Address																																																																					
Name																																																																										
Address																																																																										
5	Employment status	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Despatched workforce <input type="checkbox"/> Contract <input type="checkbox"/> Fiscal year at public office <input type="checkbox"/> Executive officer <input type="checkbox"/> Self-employed <input type="checkbox"/> Full-time self-employed <input type="checkbox"/> Family employee <input type="checkbox"/> Home worker <input type="checkbox"/> Outsourcing <input type="checkbox"/> Others()																																																																								
6	Work hour (Fixed working hours)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Mon</th><th>Tue</th><th>Wed</th><th>Thu</th><th>Fri</th><th>Sat</th><th>Sun</th><th>Holiday</th><th>Total time</th><th>Per month</th><th>:</th><th>(Break time Min.)</th> </tr> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td></td><td></td><td></td><td></td> </tr> <tr> <td colspan="9">Number of working days per month days</td> <td colspan="3">Number of working days per week days</td> </tr> <tr> <td colspan="4">Weekday</td> <td colspan="4">:</td> <td colspan="4">~ : (Break time Min.)</td> </tr> <tr> <td colspan="4">Saturday</td> <td colspan="4">:</td> <td colspan="4">~ : (Break time Min.)</td> </tr> <tr> <td colspan="4">Sunday Holiday</td> <td colspan="4">:</td> <td colspan="4">~ : (Break time Min.)</td> </tr> </table>	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Holiday	Total time	Per month	:	(Break time Min.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					Number of working days per month days									Number of working days per week days			Weekday				:				~ : (Break time Min.)				Saturday				:				~ : (Break time Min.)				Sunday Holiday				:				~ : (Break time Min.)			
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	Main working hours Shifting time		:		~ :		(Break time Min.)																																																																			
7	Recent Employment Record ※Including paid leave ※Including break & over time	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Year·Month</th> <th>Year</th> <th>Month</th> <th>Year·Month</th> <th>Year</th> <th>Month</th> <th>Year·Month</th> <th>Year</th> <th>Month</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2">days /per month</td> <td colspan="2">hours /per month</td> <td colspan="2">days /per month</td> <td colspan="2">hours /per month</td> <td colspan="2">days /per month</td> </tr> </table>	Year·Month	Year	Month	Year·Month	Year	Month	Year·Month	Year	Month										days /per month		hours /per month		days /per month		hours /per month		days /per month																																													
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days /per month		hours /per month		days /per month		hours /per month		days /per month																																																																		
8	(Planned)Period of maternity leave	<input type="checkbox"/> Planning to take <input type="checkbox"/> On leave presently																																																																								
		Period YY MM DD ~ YY MM DD																																																																								
9	(Planned)Period of childcare leave	<input type="checkbox"/> Planning to take <input type="checkbox"/> On leave presently <input type="checkbox"/> Completed																																																																								
		Period YY MM DD ~ YY MM DD																																																																								
10	Take a leave (except maternity leave & childcare leave)	<input type="checkbox"/> Planning to take <input type="checkbox"/> On leave presently <input type="checkbox"/> Completed Reason <input type="checkbox"/> Care leave <input type="checkbox"/> Sick leave <input type="checkbox"/> Others()																																																																								
		Period YY MM DD ~ YY MM DD																																																																								
11	Expected date of return-to-work	<input type="checkbox"/> Planning to take <input type="checkbox"/> Completed YY MM DD																																																																								
12	(Planned)Short-hour-work system for childcare	<input type="checkbox"/> Planning to take <input type="checkbox"/> On leave Period YY MM DD ~ YY MM DD																																																																								
		Main shift-time work schedule : ~ : (Break time Min.)																																																																								
13	Do you work at nursery or other childcare facilities?	<input type="checkbox"/> Yes <input type="checkbox"/> Yes(planned) <input type="checkbox"/> No																																																																								
14	Remarks																																																																									
15	Renewal of employment upon contract expiry	<input type="checkbox"/> Yes <input type="checkbox"/> Yes(planned) <input type="checkbox"/> No <input type="checkbox"/> Unknown																																																																								
16	Change of work condition (Currently in process or planning to make)	Change of condition (scheduled) <input type="checkbox"/> Yes <input type="checkbox"/> No Change due to <input type="checkbox"/> Employment status <input type="checkbox"/> Others()																																																																								
		Period of new condition(scheduled) YY MM DD ~ YY MM DD																																																																								
		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">New work hour after change ※Including break time</td> <td style="width: 10%;">Mo</td> <td style="width: 10%;">Hours</td> <td style="width: 10%;">Min.</td> <td style="width: 10%;">Number of working days</td> <td style="width: 10%;">days(Per month)</td> </tr> <tr> <td></td> <td>days</td> <td>Hours</td> <td>Min.</td> <td></td> <td></td> </tr> </table>	New work hour after change ※Including break time	Mo	Hours	Min.	Number of working days	days(Per month)		days	Hours	Min.																																																														
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New work hour zone after change : ~ : (Break time Min.)																																																																										

(※Employer is not required to fill out bellow.)

To be filled out by the guardian

Child's name(Katakana)	()	Date of birth	YY	MM	DD
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