様式第１号（第３条関係）

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Application for Admission to a child care institution

(Also doubling as **Family background information**)

施設等利用調整申込書（兼児童台帳）

受領日			
利用希望月		市年齢	
兄 弟 申 込	有・無	Ver.2	

To Mayor of Misato City

I hereby apply for admission to a child care institution as stated below.

下記のとおり施設等の利用調整を申込みます。

Date (YYYY/ MM/ DD): / /	
Name of guardian: 保護者氏名	

Current address 現 住 所	Misato City Phone: Home: ( ) Mobile: ( ) ( ) ( ) ( )		
Applicant child 利用希望児童	Name 氏名	Date of birth 生年月日	Sex 性別
		YYYY/ MM/ DD: / /	男・女 M/ F
Choice of institution 利用希望施設名	1st choice 第１希望	2nd choice 第２希望	3rd choice 第３希望
The 4th or further choices of child care institutions 第４希望以降の希望の有無	☐ Yes あり / ☐ No ない, (If you mark in the checkbox '☑ Yes', fill in the section of 'The 4th or further choices' on the reverse side. （「あり」に☑ した場合、裏面にご記入ください。）		
Desired period for childcare service 利用希望期間	From (YYYY/ MM/ DD): **/ / 1** To (YYYY/ MM/ DD): **2027 / 03 / 31** 令和 年 月 １日から令和 9 年 3 月 31 日まで		
Approval Certificate Number on the necessity of childcare service 支給認定証番号	( ) *Fill the number if you have already received. 既に保育の必要性の認定を受けている場合にご記入ください。		
If two or more children apply for the childcare service at the same time, (check the applicable box with ☑). 同時に２人以上申込みの場合 (該当事項に☑)	**[Preferred condition:** *Mark any one of following conditions with ☑:] 【希望条件 ※いずれかに☑】 ☐Use the childcare service only if all children are admitted to the same institution from the same month. 同時期に同施設でのみ利用希望。 ☐Use the childcare service at different institutions if they are admitted from the same month. 同時期であれば別々の施設でも利用希望。 ☐Use the childcare service if only one child is admitted and wait for the admission to the same institution until it becomes available. (Examinations for other choices of institutions not desired.) １人のみ利用決定した場合、その後は同施設のみ利用希望。（その他希望施設は選考しない。） ☐Use the childcare service even if only one child is admitted. (Use the different institution for the other child(ren) if available.) １人でも利用希望。（別々の施設でも利用希望。） －－－ **[If two or more of your children are admitted to a child care institution in the same month:** *Check any one of the following conditions with ☑**]:** 【同時期に利用決定した場合 ※いずれかに☑】 ☐Stick to the order of 'Choice of institution' filled in the application form. 希順位どおりの利用希望。 ☐Use the same institution as the other child(ren) even though your preference is lower in the order of 'Choice of institution'. (Use a different institution available for the other child(ren).) 希望順位を落としても同施設を利用希望。（別々の施設でも利用希望。）		

○Family status

利用希望児童の家庭の状況

	Name 氏名	Relationship 続柄	Date of birth 生年月日 (YYYY/MM/DD)	Disability certificate 障害者手帳	Occupation (in case someone lives separately, fill in address) 職業等(別居の場合は住所を記入)
Family members living together with the applicant child (Including those living apart from family on parent's job assignment and living separately heading to divorce) **児童の家族構成** (単身赴任や離婚前提で別居の方を含む)		**Father** 父	/ /	Hold / Not hold	
		Mother 母	/ /	Hold / Not hold	
			/ /	Hold / Not hold	
			/ /	Hold / Not hold	
			/ /	Hold / Not hold	
			/ /	Hold / Not hold	
			/ /	Hold / Not hold	

The 4th or further choices 第４希望以降

The 4th choice	The 21st choice
The 5th choice	The 22nd choice
The 6th choice	The 23rd choice
The 7th choice	The 24th choice
The 8th choice	The 25th choice
The 9th choice	The 26th choice
The 10th choice	The 27th choice
The 11th choice	The 28th choice
The 12th choice	The 29th choice
The 13th choice	The 30th choice
The 14th choice	The 31st choice
The 15th choice	The 32nd choice
The 16th choice	The 33rd choice
The 17th choice	The 34th choice
The 18th choice	The 35th choice
The 19th choice	The 36th choice
The 20th choice	The 37th choice