

Submitted documents confirmation sheet and consent form

Child's name _____

Submitted documents confirmation sheet

Please check the following items to confirm and put in the confirmation.

1 Required documents for all(1 copy required per child)	check	staff
① Submitted documents confirmation sheet and consent form ...	<input type="checkbox"/>	<input type="checkbox"/>
② Application form for use of after-school childcare business ...	<input type="checkbox"/>	<input type="checkbox"/>
③ Usage standards questionnaire ...	<input type="checkbox"/>	<input type="checkbox"/>

2 Attached documents to be submitted depending on the "parent's situation" *Copies are acceptable for siblings.

Parental situation	Attached documents (●Required △Only applicable)	father	mother	Staff
1 Employment ①Employers,self-employed an collaborators ②If you have an employment contract with a family-owned business.	●Proof of work(Up to 3 months before the date of application)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	△Work results for the last 4 weeks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●A copy of your most recent tax return or withholding tax slip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	△Documents that can confirm the fact of business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 During school or skills training	●Application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●Certification of enrollment(name * period)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●timetable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Disease <input type="checkbox"/> Hospitalization <input type="checkbox"/> in-home treatment	●Application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●Medical certificate(stating the period of medical treatment and the need for childcare)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Disabilities	●Application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●A copy of the disability certificate(satate in the period)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Nursing,long-term care,and attendants	●Application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●Medical certificate(stating the period of medical treatment and the need for childcare)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Prospective employees	●Application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●Certificate of employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Other Due to Childbirth/Other	●A copy of the maternal and child handbook for childbirth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	●Application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3 Attached documents to be submitted depending on the "Child's situation" *Siblings can copy

Children with disabilities	●Health status Application Form	<input type="checkbox"/>
	△Disability certificate	<input type="checkbox"/>
	△Documents showing enrollment at the school (if you do not have a handbook)	<input type="checkbox"/>

4 Required documents when requesting extended childcare

If you wish to have extended childcare	●Application Form for Extended Hours of After-School Childcare Club	<input type="checkbox"/>
--	---	--------------------------

Consent Form

● About usage application

	Checklist	Check
1	I confirmed the contents of 「Guideline of Meguro City Schoolchildren's Day Care Club Application」	<input type="checkbox"/>
2	As a general rule, the basic score adjustment is based on the content of the examination at the time of application.	<input type="checkbox"/>
3	We may check the contents of the application documents by phone to your home or workplace	<input type="checkbox"/>
4	If any application documents are incomplete, they will be returned. Please return all documents and resubmit your application.	<input type="checkbox"/>
5	I will promptly notify you if there is any change in living after filling them out in our living or work situations etc after application.	<input type="checkbox"/>
6	After application, if false facts are found in the application documents and do not meet the requirements, we will cancel the approval	<input type="checkbox"/>

● About use requirement

7	If the number of attendance days is fewer than 2 days per week due to lessons or other reasons, or 11 days or fewer within a 4-week period for either 2 consecutive months or 3 months in a year, the eligibility for the after-school childcare club will be deemed to have ceased.	<input type="checkbox"/>
8	If you fail to pay the after-school childcare fees for more than two months without a justifiable reason, your enrollment will be terminated. In addition, your application for the following year may not be approved.	<input type="checkbox"/>

● When the number of applications for the Schoolchildren's Day Care Club of first choice exceeds the of people accept

9	If your application is not approved, we will send you a notification. If you wish to be placed on the waiting list, please indicate this in the appropriate column.	<input type="checkbox"/>
10	If you are notified of a schoolchildren's day care club facility of your second choice, you can use it only if there's space.	<input type="checkbox"/>
11	If we are unable to accommodate your request for the schoolchildren's day care club, including up to your second preference, we will issue a Waiting List Notification.	<input type="checkbox"/>
12	If a vacancy becomes available in your preferred schoolchildren's day care club after a Waiting List Notification has been issued, applicants will be contacted in order of priority.	<input type="checkbox"/>

Confirm the above matters and agree to its contents

yy

mm

dd

Applicant's Name: