

Example for the current situation notification (Front side)

Please read the attachment note 「About submitting the Current situation notification for FY Reiwa 8 (2026)」 thoroughly.  
Please confirm if the printed information is correct (according to July's certification),  
and fill the required information with a black ink non-erasable ballpoint pen.  
If you need to make changes in your current situation (Household situation or reason for require childcare, usage hours). Please submit a change application to your current facility until day 20 from the previous month that you want to apply the change.

豊橋市長  
△△ △△ 様  
〇〇 〇〇 様受付分

令和8年度 現況届

記入日：令和8 年 〇 月 〇 日  
保護者住所：豊橋市今橋町1 番地  
保護者氏名： 〇〇 〇〇  
電話番号：090-1234-5678 Mother's cellphone

事由に該当していることの確認や利用者負担の決定の必要性を踏まえ、給付認定児童および、その児童が属する世帯員、家庭の状況について、下記の通り現況を届け出ます。

1 世帯の状況

| 認定<br>児童 | 氏 名            | 生年月日      | 性別  | 児童との<br>続柄    | 職業又は<br>勤務先名                                | 勤務先電話・所在地                        | 同居・別居 |
|----------|----------------|-----------|-----|---------------|---------------------------------------------|----------------------------------|-------|
|          |                |           |     |               |                                             |                                  |       |
| 〇        | SMITH TRISTAN  | 〇〇年〇〇月〇〇日 | 男・女 | 3             | 認定<br>情報<br>認定区分<br>保育必要量<br>認定証番号<br>入所施設名 | TEL:<br>所在地:<br>〇〇〇〇〇〇〇〇〇〇〇〇1234 | 同・別   |
|          |                |           |     |               |                                             |                                  |       |
| 〇        | SMITH JOANNE   | 〇〇年〇〇月〇〇日 | 男・女 |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
| 1        | SMITH MARK     | 〇〇年〇〇月〇〇日 | 男・女 | 4 Father      | 5 OKaisha                                   | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
| 1        | SMITH JENIFFER | 〇〇年〇〇月〇〇日 | 男・女 | Mother        | △△Bank                                      | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
| 1        | SMITH GIOVANNI | 〇〇年〇〇月〇〇日 | 男・女 | Older brother | □□Kou 3Nen                                  | TEL:Shizuoka-shi 〇〇Ku 〇〇345      | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
| 1        | SMITH JULIA    | 〇〇年〇〇月〇〇日 | 男・女 | Older Sister  | ××Youchien                                  | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
| 1        | SMITH XAVIER   | 〇〇年〇〇月〇〇日 | 男・女 | Grand father  | Unemployed                                  | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
| 1        |                |           | 男・女 |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |
|          |                |           |     |               |                                             | 〇〇〇〇〇〇〇〇〇〇〇〇5678                 | 同・別   |

※太枠内を記入してください。

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※自治体記載欄 □ 認定変更 □ 契約変更 2 保

※About the usage hours  
・Standard childcare (Long term childcare)  
Around 11 hours per day  
・Short childcare (Ordinary term childcare)  
Around 8 hours per day  
(Job-searching and Childcare leave certifications are only available for short childcare)

Please provide a daytime  
phone number which we can  
contact E.g: Mother's  
cellphone, mother's work

- 1 Same household family members + Separated household siblings or grandparents who lives with the same income
  - 2 Birthdate
  - 3 Usage hours (※)
  - 4 Relationship with the child
  - 5 Profession, workplace, school name, grade
  - 6 Adress of siblings from separated household (Not required for the same)
  - 7 Same hosehold or separated household of the
- ※Attention  
1~3 Please confirm the issued content.  
4~7 Please provide the required information.

裏面もあります  
Continue on back

Example for the current situation notification (Backside)

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様受付分

## 2 保育を必要とする理由

| 続柄  | 必要とする理由                                                | 必要書類等                                                                                       |
|-----|--------------------------------------------------------|---------------------------------------------------------------------------------------------|
|     | ■就労 (Employment)                                       | 「就労証明書、事業の状況が確認できる書類（自営業の方）」通勤時間 <b>20分</b><br>就労時間 <b>8時30分～17時00分</b> 、就労日数 <b>20日</b> /月 |
|     | <input type="checkbox"/> 妊娠・出産 (Pregnancy/Child birth) | 「母子健康手帳の写し（表紙及び出産予定日が確認できるページ）」                                                             |
|     | <input type="checkbox"/> 疾病・障がい (Disability/Illness)   | 「診断書」                                                                                       |
|     | <input type="checkbox"/> 介護・看護 (Nurse/Caregiving)      | 「診断書」                                                                                       |
| (父) | <input type="checkbox"/> 災害復旧 (Disaster recovery)      | 「り災証明書」                                                                                     |
|     | <input type="checkbox"/> 求職活動 (Job searching)          | 「求職活動申立書」                                                                                   |
|     | <input type="checkbox"/> 就学 (Study)                    | 「在籍期間がわかる書類及び時間割など」通学時間 分、就学日数 日/週                                                          |
|     | <input type="checkbox"/> 育児休業 (Childcare leave)        | 「育児休業期間のわかる書類」                                                                              |
|     | <input type="checkbox"/> その他 (Others)                  |                                                                                             |
|     | ■就労                                                    | 「就労証明書、事業の状況が確認できる書類（自営業の方）」通勤時間 <b>20分</b><br>就労時間 <b>8時30分～17時00分</b> 、就労日数 <b>20日</b> /月 |
|     | <input type="checkbox"/> 妊娠・出産 (Pregnancy/Child birth) | 「母子健康手帳の写し（表紙及び出産予定日が確認できるページ）」                                                             |
|     | <input type="checkbox"/> 疾病・障がい (Disability/Illness)   | 「診断書」                                                                                       |
|     | <input type="checkbox"/> 介護・看護 (Nurse/Caregiving)      | 「診断書」                                                                                       |
| (母) | <input type="checkbox"/> 災害復旧 (Disaster recovery)      | 「り災証明書」                                                                                     |
|     | <input type="checkbox"/> 求職活動 (Job searching)          | 「求職活動申立書」                                                                                   |
|     | <input type="checkbox"/> 就学 (Study)                    | 「在籍期間がわかる書類及び時間割など」通学時間 分、就学日数 日/週                                                          |
|     | <input type="checkbox"/> 育児休業 (Childcare leave)        | 「育児休業期間のわかる書類」                                                                              |
|     | <input type="checkbox"/> その他 (Others)                  |                                                                                             |

The current reason the child's guardian are authorized by Toyohashi to use childcare services are marked in black. Please attach the documents that correspond with your reason for needing

As it is the basis  
for the certification,  
those who are  
applying for  
employment or study  
should put the number  
of days per month  
they attend, as well

### 3 給付認定の現況確認

給付認定申請内容（世帯の状況、保育を必要とする理由）の変更の有無

※どちらかにチェックしてください。

|                                       |                            |            |
|---------------------------------------|----------------------------|------------|
| <input checked="" type="checkbox"/> 無 | <input type="checkbox"/> 有 | [ 変更内容 ]   |
|                                       |                            | [ 7月変更済み ] |

変更がある場合は、在籍圏を通じて必要書類を期限までに提出してください。

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該当する場合はチェックしてください。

☐ 生活保護世帯      ☐ ひとり親世帯      ☐ 障害者世帯

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※太枠内を記入してください。

現況届作成日：令和〇年〇月〇日

About having or not a  
change, in case you already  
applied for a change  
between July and August,  
please check 「無」 and wire  
in the paranthesis 「Already  
applied in July or August」.  
Those who want to apply a  
change from September and  
beyond please submit  
separately to your

**Single-parent household (ひとり親世帯)**  
Households receiving Jidou Fuyou Teate (Includes households receiving single-parent medical expense aid)  
**Household with individual with a disability (障害者世帯)**  
If someone in the household has a physical or learning disability, etc., and has Shintai Shougai-sha Techou, Ryouiku Techou, or Seishin

## «Reference» Reasons for needing childcare

| Reason                          | Guardian's situation                                                                                                            | Authorized period                                                                      |
|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| 就労 (Employment)                 | Works at least 64 hours per month<br>(4 or more hours per day and 4 or more days per week is a rough approximation)             | Until the day before your child begins elementary school                               |
| 妊娠・出産<br>(Pregnancy/Childbirth) | Pregnant or just gave birth                                                                                                     | From 2 months before childbirth until the end of the month in which 8 weeks postpartum |
| 疾病・障がい<br>(Illness/Disability)  | You have an illness or disability and cannot handle round-the-clock childcare                                                   | Period written on the Medical Certificate you receive from your doctor.                |
| 介護・看護<br>(Nursing/Caregiving)   | Need constant nursing/caregiving                                                                                                | Period written on the Medical Certificate you receive from your doctor.                |
| 災害復旧 (Disaster recovery)        | You are engaged in disaster recovery                                                                                            | Period for which the disaster recovery is expected to continue                         |
| 求職活動 (Job-searching)            | You are looking for a job                                                                                                       | 3 months                                                                               |
| 就学 (Study)                      | You are attending school (Includes job training at a vocational school)                                                         | Period printed on student ID/Certificate of enrollment                                 |
| 育児休業<br>(Childcare leave)       | You have a child in daycare, when you took childcare leave and need your child to be able to continuing attending that facility | Childcare leave period (typically 1 year)                                              |
| その他 (Others)                    | The city recognizes circumstances similar to those listed above                                                                 | Necessary period                                                                       |