

※ This example is for those who applied to transfer to another facility, but get a pendent status and wants to continue attending to your current facility.

Application Form for Use

(and register of children)

保育施設等利用申込書

(兼保育児童台帳)

Example

To the Head of the Toyohashi City Welfare Office

☐ New/Transfer Application☒ Continued Use Application

Application Date: 202X年 月 日

Guardian Address	〒440-0000 Toyohashi-shi Imahashi-cho 1 Banchi
Furigana	
Child Name	Toyohashi Tammy Heisei・Reiwa 2024年 〇〇月 〇〇日
Furigana	
Guardian Name (Representative Guardian)	Toyohashi Tim Shouwa・Heisei 1994年 〇〇月 〇〇日

I am applying to enroll my child in preschool, kindergarten, etc., as described below

	Preferred Childcare Facility Name	Reason for Wanting to Enroll	事業所番号 * City Use
1 st Choice	Current Hoikuen Name	Already attending (Keizoku (Horyu))	
2 nd Choice			
3 rd Choice			
4 th Choice			

As applications are made for each school year, the longest you can request childcare for is for the length of the Reiwa 9 (2027) school year (April 1, 2027 to March 31, 2028)

check the box to the right and fill in a separate sheet. ※There is no official form, so you can write this information as you'd like, but an example is available on the official Toyohashi website.		☐ I have 6 or more facilities (listed on separate sheet)	
Reason childcare is required	There is nobody to look after Tammy. Her mother and I both work, and her grandmother also works at an appliance store.	Period during which childcare is required	From 2027年 4月 1日 to 2028年 3月 31日
Notes	Please give specific reasons as to why you need childcare.		

(continued on reverse)

☆The information you write below will be provided to the childcare facility your child is accepted into.
Please complete all sections.

	Name	Relation to Applicant Child	Age (as of April 1, 2027)	Sex	Place of Employment, or School Name + Grade, etc.
Applicant Child	Furigana	Self	2 years old 歳	M • F	
	Toyohashi Tammy		2024年〇〇月〇〇日		
Members of Child's Household	Toyohashi Tim	Father	33 歳	M • F	Yoshida Department Store
	Toyohashi Tina	Mother	32 歳	M • F	JA Group Imahashi
	Toyohashi Tristan	Older Brother	7 歳	M • F	Toyohashi Elementary School, Grade 2
			歳	M • F	
			歳	M • F	
			歳	M • F	
TEL	(Home) — — (Father Cell) 000—0000—0000 (Mother Cell) 000—0000—0000				

(1) What number child in your family is the child you are applying for

☐ 1st child	☒ 2nd child	☐ 3rd child	☐ 4th child	☐ 5th child	☐ 6th child	☐ 7th child
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(2) Please tell us about your child's development, health examinations, etc. If there are any **delays in their development, illnesses they have dealt with, etc., please fill in information about these conditions and speak with the childcare facilities you are applying to in advance.**

<u>Development</u>	
Physical	Standing while holding something (8 months) Walking unassisted (11 months)
Language	Started speaking at (18 months) Delay in speech? (Y • (N))
Toilet independence (going without help)	Urination (Peeing): (Y) • N Defecation (Pooping): Y • (N)
Concerning Behavior? (Sucks on thumb, sometimes can't keep calm or loses temper)	
Major illnesses (None)	
Allergies, chronic illnesses (Albumin/egg white allergy)	
Medical institutions visited for child's development, etc. (Toyohashi Clinic)	
Checkup for 18-month-old infants	☒ Examined → Guidance ☐ Yes Details: ☐ Not yet examined ☒ No
Checkup for 3-year-old toddlers	☐ Examined → Guidance ☐ Yes Details: ☒ Not yet examined ☐ No

(3) Grandparents

Grandparents on father's side	Grandparents on mother's side
☐ Same household/on same plot of land/next door ☐ Living Elsewhere→Address () ☒ Bereavement (Deceased)	☐ Same household/on same plot of land/next door ☒ Living Elsewhere→Address (□□市〇〇町△番地) ☐ Bereavement (Deceased)

Be as specific as possible, down to the *banchi*

*Please contact the Toyohashi City Hall Nursery Division (Hoiku-ka) (TEL: 0532 51-2322) if you have any questions regarding this form or your application.