

Employment Certificate

REFERENCE ONLY DO NOT FILL IN 記入しないでください

To: Mayor of Toshima City

Date of certification	YY	MM	DD
Name of company			
Name of representative			
Address			
Telephone No.	—	—	
Person in charge			
Tel. No. of above person	—	—	

I certify that the following information is true and correct.

※You may be charged with a criminal offense if the contents of this certificate are created or altered without the permission of the employer.

No.	Item	Entry column																																																																														
1	Type of business	<input type="checkbox"/> Agriculture & forestry <input type="checkbox"/> Fishing industry <input type="checkbox"/> Mining, quarrying & gravel extraction <input type="checkbox"/> Construction <input type="checkbox"/> Manufacturing <input type="checkbox"/> Electricity, gas, heat & water supply <input type="checkbox"/> Information & communication <input type="checkbox"/> Transportation & postal service <input type="checkbox"/> Wholesale & retail <input type="checkbox"/> Finance & insurance <input type="checkbox"/> Real estate & equipment leasing <input type="checkbox"/> Academic research, professional & technical services <input type="checkbox"/> Accommodation & food service <input type="checkbox"/> Lifestyle service & entertainment <input type="checkbox"/> Medical & welfare <input type="checkbox"/> Education & learning support <input type="checkbox"/> Complex service business <input type="checkbox"/> Public business <input type="checkbox"/> Other ()																																																																														
2	Katakana Name																																																																															
2	Name	Date of birth YY MM DD																																																																														
3	Employment period	<input type="checkbox"/> Indefinite <input type="checkbox"/> Fixed Period (Start date of employment for indefinite) YY MM DD ~ YY MM DD																																																																														
4	Name of work place	Name Address																																																																														
5	Type of employment	<input type="checkbox"/> Permanent employee <input type="checkbox"/> Part time/albeit <input type="checkbox"/> Temporary worker <input type="checkbox"/> Contract employee <input type="checkbox"/> Part time employee at public office <input type="checkbox"/> Part time & temporary employee <input type="checkbox"/> Officer <input type="checkbox"/> Self-employed <input type="checkbox"/> Exclusive staff of self-employed <input type="checkbox"/> Employed for family business <input type="checkbox"/> Homemaker <input type="checkbox"/> Outsourcing <input type="checkbox"/> Other ()																																																																														
6	Work hour (Fixed)	<table> <tr> <td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td><td>S</td><td>Holiday</td><td>Total hour</td><td>Per month</td><td>hour</td><td>min.</td><td>(Break min.)</td></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><td></td></tr> <tr> <td colspan="8">Work days per month</td><td>days</td><td>Work days per week</td><td></td><td>days</td><td></td></tr> <tr> <td colspan="8">Weekdays</td><td>hour</td><td>min.</td><td>~</td><td>hour</td><td>min (Break min.)</td></tr> <tr> <td colspan="8">Saturday</td><td>hour</td><td>min.</td><td>~</td><td>hour</td><td>min (Break min.)</td></tr> <tr> <td colspan="8">Sunday/holiday</td><td>hour</td><td>min.</td><td>~</td><td>hour</td><td>min (Break min.)</td></tr> </table>	M	T	W	T	F	S	S	Holiday	Total hour	Per month	hour	min.	(Break 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"/>						Work days per month								days	Work days per week		days		Weekdays								hour	min.	~	hour	min (Break min.)	Saturday								hour	min.	~	hour	min (Break min.)	Sunday/holiday								hour	min.	~	hour	min (Break min.)
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6	Work hour (Irregular)	<table> <tr> <td>Total</td><td><input type="checkbox"/> month <input type="checkbox"/> week</td><td>hour</td><td>min (Break min.)</td></tr> <tr> <td>Work days</td><td><input type="checkbox"/> month <input type="checkbox"/> week</td><td>day</td><td></td></tr> <tr> <td>Main work hours</td><td>hour</td><td>min. ~</td><td>hour min (Break min.)</td></tr> </table>	Total	<input type="checkbox"/> month <input type="checkbox"/> week	hour	min (Break min.)	Work days	<input type="checkbox"/> month <input type="checkbox"/> week	day		Main work hours	hour	min. ~	hour min (Break min.)																																																																		
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7	Recent work record ※Includes paid vacations, breaks, and overtime	<table> <tr> <td>Yr./Mo.</td><td>Yr.</td><td>Mo.</td><td>Yr./Mo.</td><td>Yr.</td><td>Mo.</td><td>Yr./Mo.</td><td>Yr.</td><td>Mo.</td></tr> <tr> <td colspan="2">days/Mo.</td><td>hours/Mo.</td><td colspan="2">days/Mo.</td><td>hours/Mo.</td><td colspan="2">days/Mo.</td><td>hours/Mo.</td></tr> </table>	Yr./Mo.	Yr.	Mo.	Yr./Mo.	Yr.	Mo.	Yr./Mo.	Yr.	Mo.	days/Mo.		hours/Mo.	days/Mo.		hours/Mo.	days/Mo.		hours/Mo.																																																												
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days/Mo.		hours/Mo.	days/Mo.		hours/Mo.	days/Mo.		hours/Mo.																																																																								
8	Period of maternity leave (Planned)	<input type="checkbox"/> Will take <input type="checkbox"/> Is taking Period YY MM DD ~ YY MM DD																																																																														
9	Period of childcare leave (Planned)	<input type="checkbox"/> Will take <input type="checkbox"/> Is taking <input type="checkbox"/> Has taken Period YY MM DD ~ YY MM DD																																																																														
10	Leaves other than above	<input type="checkbox"/> Will take <input type="checkbox"/> Is taking <input type="checkbox"/> Has taken Reason <input type="checkbox"/> Nursing care leave <input type="checkbox"/> Sick leave <input type="checkbox"/> Other () Period YY MM DD ~ YY MM DD																																																																														
11	Date of return-to-work (Planned)	<input type="checkbox"/> Plan to return <input type="checkbox"/> Has returned YY MM DD																																																																														
12	Short-hour-work system for childcare (Planned)	<input type="checkbox"/> Plan to return <input type="checkbox"/> Is taking Period YY MM DD ~ YY MM DD Main work hours hour min. ~ hour min (Break min.)																																																																														
13	Work as nursery school, kindergarten or childcare teacher	<input type="checkbox"/> Yes <input type="checkbox"/> Expect to work <input type="checkbox"/> No																																																																														
14	Renewal or non-renewal after expiry (of the employment contract)	<input type="checkbox"/> Yes <input type="checkbox"/> Expect to renew <input type="checkbox"/> No <input type="checkbox"/> Undecided																																																																														
15	Shorten childcare leave if provisionally approved	<input type="checkbox"/> Can <input type="checkbox"/> Possible <input type="checkbox"/> Cannot																																																																														
16	Childcare leave extension	<input type="checkbox"/> Can <input type="checkbox"/> Possible <input type="checkbox"/> Cannot																																																																														
17	Solo assignment (Planned)	YY MM DD ~ YY MM DD																																																																														
18	Remarks																																																																															
19	Filled by parent/guardian	<table> <tr> <td>Name of child</td><td>Date of birth YY MM DD</td><td>Name of facility</td><td><input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)</td></tr> <tr> <td>Name of child</td><td>Date of birth YY MM DD</td><td>Name of facility</td><td><input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)</td></tr> <tr> <td>Name of child</td><td>Date of birth YY MM DD</td><td>Name of facility</td><td><input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)</td></tr> <tr> <td>Name of child</td><td>Date of birth YY MM DD</td><td>Name of facility</td><td><input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)</td></tr> </table>	Name of child	Date of birth YY MM DD	Name of facility	<input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)	Name of child	Date of birth YY MM DD	Name of facility	<input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)	Name of child	Date of birth YY MM DD	Name of facility	<input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)	Name of child	Date of birth YY MM DD	Name of facility	<input type="checkbox"/> Using <input type="checkbox"/> Applying (first choice)																																																														
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No.	日本語	英語
1	農業・林業 漁業 鉱業・採石業・砂利採取業 建設業 製造業 電気・ガス・熱供給・水道業 情報通信業 運輸業・郵便業 卸売業・小売業 金融業・保険業 不動産業・物品賃貸業 学術研究・専門・技術サービス業 宿泊業・飲食サービス業 生活関連サービス業・娯楽業 医療・福祉 教育・学習支援業 複合サービス事業 公務 その他	Agriculture and forestry Fishing industry Mining, quarrying and gravel extraction Construction Manufacturing Electricity, gas, heat and water supply Information and communications Transportation and postal services Wholesale and retail Finance and insurance Real estate and equipment leasing Academic research, professional and technical services Accommodation and food service Lifestyle services and entertainment Medical and welfare Education and learning support Complex service business Public business Other
3	無期 有期	Indefinite Fixed
5	正社員 パート・アルバイト 派遣社員 契約社員 会見年度任用職員 非常勤・臨時職員 役員 自営業者 自営業専従者 家族従業者 内職 業務委託 その他	Permanent employee Part time/ albeit Temporary worker Contract employee Part time employee at public office Part-time and temporary employee Officer Self-employed Exclusive staff of self-employed Employed for family business Homeworker Outsourcing Other
6	月 火 水 木 金 土 日 祝日 月間 週間	Mon. Tue. Wed. Thur. Fri. Sat. Sun. Holiday Monthly Weekly
8 ～ 10	取得予定 取得中 取得済み	Will take Is taking Has taken
11	復職予定 復職済み	Plan to return Has returned
12	取得予定 取得中	Will take Is taking
13 ～ 14	有 有(予定) 無 未定	Yes Expect to work No Undecided
15 ～ 16	可 可(予定) 否	Can Possible Cannot
19	利用中 申込中(第一希望)	Using Applying (first choice)