To guardians: Please submit this document to your facility in a dedicated envelope with attached documents enclosed in it and your name, etc. on it.

(Form 1)

Application form for the Certification of (for the Change in) the Subsidy for Early Childhood Education and Childcare Fees

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To Kyoto City M

Entry example

encil or an erasable ballpoin

For New Subsidy No.1

[Matters agreed upon]

1. We may ask public offices to allow us to view necessary documents or to provide us with related materials for the provision of proper educational and daycare services and to confirm the data of applicants and their household members, including their tax status for the screening of the Certification of the Subsidy for Early Childhood Education and Childcare Fees, office work related to the Supplementary Benefit Program, and other educational and daycare services.
2. Details entered on your application form, etc. may be provided to the institution and/or its operator when they are deemed necessary as information related to the certification and grant of the Subsidy for Early Childhood Education and Childcare Fees, as well as other educational and childcare services.
3. In accordance with the provision of Article 30-11 of the Child Care Support Act (hereinafter referred to as "the Act"), utilization expenses for facilities and other services may be paid to specified child and childcare support providers instead of the certified guardians.
4. Due to the high volume of accreditation work during the year's early months, the notification of results may be postponed regardless of the application date should the use of the services begin in April of the new fiscal year as is written per the provisions under Article 30-5, paragraph 5 of the Act.
5. The Certification of the Subsidy for Early Childhood Education and Childcare Fees may be canceled if the details written in the application differ from factual reality.
6. Those who have used cabinet order-designated institutions (business-operated childcare facilities) stated within the provision under Article 7, Paragraph 10, Item 4-c of the Act, cannot receive this certification.
7. Guardians of children who use kindergartens and after-hours childcare pursuant to Article 7, Paragraph 10, item 5 of the Act must entrust facility utilization expense related applications to the providers or directors of the institutions (principals of their kindergartens) that they will use unless the guardians themselves or their institutions make a special request.
8. The acquired Individual Number will be used for administrative procedures related to the Certification of the Subsidy for Early Childhood Education and Childcare Fees, in accordance with the law.

Write down your name in English.

Upon asser pon" above, I hereby apply for the certification hildhood Education and Childcare Fees

Date of application	November 12, 2026

Name of applicant (guardian) * Guardian living with the child(ren)	Name in English: Hanako Kyoto **京都　花子** (Date of birth)　November 21, 1987
Address	Postal code: 123-4567　XXXX-cho, Nakagyo-
Contact information (Mark☑the main contact information)	☐Home (　—　—　) ☐Father(cellphone) (　—　—　) ☑ Mother (cellphone)　(080－0000－XXXX)

Please provide a daytime contact number (phone number). The Kyoto city government may contact you if confirmation is required.

* Please provide a daytime phone number.

unt information cann may be requested.)

Write down the name of your financial institution (Headquarters, Branch, Office)

Justify your account no. to the right.

Bank	Headquarters	Savings	Account no. (right-aligned)	Name in English: Hanako Kyoto
Credit Un / Agricultural	Branch		0 0 0 0 0 0 0	**京都　花子**

Encircle one from each

Read the guidelines carefully and check the appropriate category

under the s

Indicate the applicant's name

2. Applicant Children

Desired certification starting date (use)	☑April 1, 2027 (for April enrollment)　☐Day　llment)　☐Year _____ Month _____ Day _____		
Name in English	Yuko Kyoto	Type of certification	☐New Subsidy No. 1　☐New Subsidy No. 2 ☐New Subsidy No. 3
Name	**京都　優子** (Date of birth)　May 23, 2022	Childcare Status	☐Currently using a childcare facility (facility name:) ☑Applied for childcare (first-choice facility:)
Relation-ship		National Individual Number My Number	

If entry begins in April, please indicate April 1 on the desired certification starting date, even if the entrance ceremonies or use of the facility starts on April 2 or onwards.

If applicable, please enter the name of your preferred childcare facility or the one your child currently attends.

Please enter the applicant child's Individual Number (My Number).

	enrollm　llment)　☐Year		
Name in English		Type of certification	Subsidy No. 1　☐N ☐New Subsidy No. 3
Name	(Date of birth)	Childcare Status	☐Currently using a childcare facility (facility name:) ☐Applied for childcare (first-choice facility:)
Relation-ship with the applicant		National Individual Number My Number	

(Please refer to the following certification category to fill in the document.)

Type	Applicable children	Applicable institutions	Others
New Subsidy No.1	Children aged 3 or older	Kindergartens (excluding ones under the new system) and Pre-school Section of the Special Needs Education School, etc.	Those who only use the standard education hours of kindergarten and do not use after-hours childcare services, and those who do not meet the reasons for requiring childcare services (those who are not eligible for New Subsidy No. 2 or 3 Certification)
New Subsidy No.2	Children aged 3 or older (Eligible starting the first April after their third birthday)	In addition to the institutions above, after hours childcare at a kindergarten or a certified Center for Early Childhood Education and Care (ECEC), non-accredited daycare institutions, temporary daycare, and sick childcare, etc.	Both parents must be eligible for the reasons for requiring childcare services. The following documents are required separately: ○ Statement of the reasons for requiring childcare services ○ Attached documents based on the reasons for requiring childcare services (Employment Certificate, Certificate of Enrollment in School, A copy of a Maternal and Child Health Handbook, Etc.)
New Subsidy No.3	Children aged 0-2 ((Limited to municipal tax exempt households)		

*A list of eligible non-accredited childcare facilities and facilities/services, such as temporary care, is available on the Kyoto City website, which is listed on the information letter. Please check in advance whether the facility you plan to use is eligible for free early education and childcare services.

Please fill in the back side

3. Facilities currently being used or scheduled to be used

Child's name	Facility Name		tarting month (of use or planned use)
京都　優子	XXXX Kindergarten (Location if it is outside the city)	Kindergarten, After-hours childcare, Non-accredited daycare institution, Others( )	Month April Year 2026
	(Location if it is outside the city)	Kindergarten, After-hours childcare, Non-accredited daycare institution, Others( )	

Encircle "Kindergarten"

Indicate the enrollment year and month

4. Household Members (Excluding the applicant children and including the family members who share the household economy yet live separately.)

Please write your name in English.

Household members (applicable child's guardians, brothers, sisters) Name	Relation-ship with the applicant	Date of Birth	Occupation or school names etc.	National Identification Number (My Number)
Hanako Kyoto 京都　花子	Applicant	November 21, 1987	Company employee	o o o o o × × o o o o o
Taro Kyoto 京都　太郎	Husband	August 7, 1987	Company employee	o o o o o o o × o o o o
Jiro Kyoto 京都　次郎	Eldest Son	March 4, 2010	XXXX Elementary School	o o o o o × o o o o o o

Please fill in all the members of the household except the applicant child, including parents, siblings, and relatives living together.

5. Household Situation (Fill out the relationship from the point of view of the applicant child)

Single-parent household	☑ Inapplicable ☐ ( ))
Are there family members separately and what are their relationships with the applicant?	☐No ☑ Yes (Father /Mother /C
Reasons for living separately	☑ Employment ☐ School ☐ Childbirth ☐ Nursing care ☐ Divorce talks ☐ Others( )
Address(es) of separated family members	123 XXX-cho, XXXXX City, XXXXX Prefecture
(Planned) period of living separately	September 1, 2026 to August 31, 2027
Are you living on welfare?	☑ No ☐Yes (Month of starting to live on welfare:)
Is there a person with a disability in your household?	☐No ☑ Yes (Please also fill in the spaces below)
Name	京都　次郎
Disability grade, etc.※	Rehabilitation

For single-parent households, or those with members living separately, please tick the appropriate box and select the reason

Please indicate here if there are any family members living separately

Should you currently be living on welfare, please indicate the month when you started.

If there is a child/household member in the household with a disability, tick "yes" and indicate the name and details of the

* You may be required to send additional docun

[The fields below shall be filled in only by applicants for the Certification for New Subsidy No.2 or No.3 stated in "2. Applicant children"]

6. Reasons for requiring daycare services (Choose one main reason for respective parents. The Statement of Reasons for needing Childcare Services and attached documents for the reasons of needing day care services.)

Father or oth guardian ( )	covery ☐ Others
Mother or oth guardian ( )	covery ☐ Others

Filling this field is not required for New Subsidy No.1 Certification applicants.

(October 2026)