

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

To Kyoto City Mayor

Entry example

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For New Subsidy No.1

ents.

[Matters agreed upon]

- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.

Upon receiving this application form above, I hereby apply for the certification

Date of application

November 12, 2021

Write down your name in

English.

Name

Birth:

Taro Kyoto

(guardian)

京都 太郎

(Date of birth) November 21, 1987

Postal code: 123-4567 XXXX-cho, Nakagyo-ku, Kyoto City

☐ Home: 123-0000

☐ Father (cellphone): 080-XXXX-0000 ☒ Mother (cellphone): 080-0000-XXXX

(Mark ☒ the main contact information)

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

Number(s) other than the main contact

Indicated (Indicate the account no. to the right.)

Name of financial institution	Name of headquarters/branch/office	Branch No.	Account no. (The number should be justified to the right)	Account Holder
Bank	Headquarters			Name in English: Taro Kyoto
Credit Union	Branch			京都 太郎
Agricultural Cooperative	Office		00000000	

2. Applicant Child

Encircle one from each

Indicate the applicant's name

Applicant children	Desired certification starting date (use)	<input checked="" type="checkbox"/> April 1, 2025 (When enrolling in April) <input type="checkbox"/> Day before the 3 rd Birthday (If less than 3 years old during admission) <input type="checkbox"/> Birth	Relationship with the applicant	Sex	Type of certification
	Name in English	Yuko Kyoto	Eldest daughter	Female	<input type="checkbox"/> New Subsidy No. 1 <input type="checkbox"/> New Subsidy No. 2 <input type="checkbox"/> New Subsidy No. 3
	Name	京都 優子			National Individual Number My Number
	(Date of birth)	May 23, 2018			National Individual Number My Number
	Name				<input type="checkbox"/> New Subsidy No. 1 <input type="checkbox"/> New Subsidy No. 2 <input type="checkbox"/> New Subsidy No. 3
	(Date of birth)				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.

Read the guidelines carefully and check the appropriate category

(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	Encircle "Kindergarten"	Starting 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()	April 2022
	(Location if it is outside the city)	Kindergarten, After-hours childcare, Non-accredited daycare institution, Others()	Month Year
	(Location if it is outside the city)	Kindergarten, After-hours childcare, Non-accredited daycare institution, Others()	Month Year

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.	Relationship with the applicant	Date of Birth	Occupation or school names etc.	National Identification Number (My Number)
Taro Kyoto 京都 太郎	Applicant	November 21, 1987	Company employee	○ ○ ○ ○ ○ × × ○ ○ ○ ○ ○
Hanako Kyoto 京都 花子	Wife	August 7, 1987	Company employee	○ ○ ○ ○ ○ ○ ○ × ○ ○ ○ ○
Jiro Kyoto 京都 次郎	Eldest Son	March 4, 2010	XXXX Elementary School	○ ○ ○ ○ ○ × ○ ○ ○ ○ ○
		Month Day Year		
Please fill in all the members of the household except the applicant child, including parents, siblings, and relatives living together.				
		Month Day Year		

household members (applicable child's guardians, brothers, sisters)

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

Single-parent household	<input checked="" type="checkbox"/> Inapplicable <input type="checkbox"/> Applicable (Bereavement / Divorce / Unmarried / Others)
Are there family members separately and what are their relationships with the applicant?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Father / Mother / Child() / Other())
Reasons for living separately	<input checked="" type="checkbox"/> Employment <input type="checkbox"/> School <input type="checkbox"/> Childbirth <input type="checkbox"/> Nursing care <input type="checkbox"/> Divorce talks <input type="checkbox"/> Others()
Address(es) of separated family members	123 XXX-cho, XXXXX City, XXXXX Prefecture
Are you living on welfare?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Month of starting to live on welfare)
Is there a person with a disability in your household?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Please also fill in the s)
Name	京都 次郎
Disability grade, etc.*	Rehabilitation

* You may be required to send additional documents to certify some items by the city government's request.

[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 guardian ()	recovery <input type="checkbox"/> Others
Mother or guardian ()	recovery <input type="checkbox"/> Others

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

※Central Administration Office Entry field	Certification	Entry field for Kyoto City Office. Entry by applicant not required.	Registration date confirmed by	Entry date Entered by
Remarks			/	/