

様式第 1 （第 5 条 関 係）

(front)

year month day

(To) Komaki city Mayor

Komaki City Free School Lunch for 2nd and 3rd and Subsequent Children
 Application and Consent Form 小牧市学校給食費第 2 子生徒及び第 3 子以降児童生徒無償化
 申請書兼承諾書

I apply for Free School Lunch as follows

Applicant

(Parent)

Address

Furigana

Name

Phone number

accessible at day time

Situation of children of the same household dependent on the parent (※1)

	Furigana Name	Date of Birth	Enrolled School	Grade・ Group	Attached documents (※2)
1		Year Month Day			<input type="checkbox"/>
2		Year Month Day			<input type="checkbox"/>
3		Year Month Day			<input type="checkbox"/>
4		Year Month Day			<input type="checkbox"/>
5		Year Month Day			<input type="checkbox"/>

(※1) The free school lunch will be applied to those among the children, if in age order from the oldest to youngest, the 2nd child is a junior high school student and the 3rd and subsequent children are primary, junior high school students will receive free school lunch.

(※2) To confirm that the children are dependents of the parent, please attach the following documents. However, children living at the same address within the first March 31, after reaching 18 years-old are not required to submit it.

- Those children that are on the same household but live in a different address or are dependent of the parent after reaching 18 years-old within the first March 31, please attach a copy of a document (such as gensen choushu (Withholding tax certificate), Kakutei shinkoku (tax return), etc.) that confirms that the children are dependent of the parent.

< Application for approval and confirmation of dependents (The applicant should sign in※ written below)

I certify that I am supporting the child(ren) listed in this application. In order to confirm the contents of the application I hereby give my consent to use the information held by the city regarding Basic Resident Register and public assistance records as well as to be referred to the relevant authorities or to the relevant agencies. I have obtained the consent of all members of my household for this matter.

※Applicant (parent) Signature

(Back)

(space for an attached the copies)

• Those children that are on the same household but live in a different address or are dependent of the parent after reaching 18 years-old within the first March 31, please attach a copy of a document (such as gensen choushu (Withholding tax certificate), Kakutei shinkoku (tax return), etc.) and other documents .that confirms that the children are dependent of the parent. (such as student ID card, certificate of illness or disability that proves the child is not expected to earn an independent living, etc.).

Space used for Komaki city (please do not write here)

給食費負担 者(保護者)	住記情報 確認	生活保護 受給確認	源泉徴収 票確認	確定申告書 確認	その他書類 確認	無償化 可否	決定・却下 通知
<input type="checkbox"/> 申請者 と同一	<input type="checkbox"/> 適	<input type="checkbox"/> 無	<input type="checkbox"/> 適	<input type="checkbox"/> 適	<input type="checkbox"/> 適	<input type="checkbox"/> 可	年 月 日
<input type="checkbox"/> その他	<input type="checkbox"/> 不可	<input type="checkbox"/> 有	<input type="checkbox"/> 不可	<input type="checkbox"/> 不可	<input type="checkbox"/> 不可	<input type="checkbox"/> 不可	

Note The size of the paper should be Japan Industrial Standard

様式第1 (第5条関係)

(front)

Model		Oyear	Omonth	Oday	
(To) Komaki city Mayor					
Komaki City Free School Lunch for 2nd and 3rd and Subsequent Children					
Application and Consent Form 小牧市学校給食費第2子生徒及び第3子以降児童生徒無償化申請書兼承諾書					
I apply for Free School Lunch as follow					
Applicant	(Parent)	Address	Komaki		
		city	Horinouchi		
			3 choume	1 banchi	
		Furigana	コマキ	タロウ	
		Name	Komaki	Tarou	
		Phone number			
		accessible at day	090-111	-1111	
		time			
Situation of children of the same household dependent on the parent (※1)					
	Furigana	Date of Birth	Enrolled school	Grade・Group	Attached documents (※2)
	Name				
1	コマキ ハナコ Komaki Hanako	H O Year O Month Oday	University Student (different address)	Oyear	<input checked="" type="checkbox"/>
2	コマキ イチロウ Komaki Ichirou	H O Year O Month Oday	unemployed		<input checked="" type="checkbox"/>
3	コマキ ジロウ Komaki Jirou	H O Year O Month Oday	High school student	Oyear	<input type="checkbox"/>
4	コマキ メグミ Komaki Megumi	H O Year O Month Oday	OO junior high student affiliated with OO university	Oyear	<input type="checkbox"/>
5	コマキ サクラ Komaki Sakura	H O Year O Month Oday	Komaki Municipal OO primary school	Oyear O group	<input type="checkbox"/>
<p>(※1) The free school lunch will be applied to those among the children, if the 2nd child in age order from the oldest to youngest is a junior high school student and the 3rd and subsequent children are primary school students will receive free school lunch.</p> <p>(※2) To confirm that the children are dependents of the parent, please attach the following documents. However, children living at the same address within the first March 31, after reaching 18 years-old are not required to submit it.</p> <ul style="list-style-type: none"> Those children that are on the same household but live in a different address or are dependent of the parent after reaching 18 years-old within the first March 31, please attach a copy of a document (such as gensen choushu (Withholding tax certificate), Kakutei shinkoku (tax return), etc.) that confirms that the children are dependent of the parent. <p>< Application for approval and confirmation of dependents (The applicant should sign in ※ written below)</p> <p>I certify that I am supporting the child(ren) listed in this application. In order to confirm the contents of the application I hereby give my consent to use the information held by the city regarding Basic Resident Register and public assistance records as well as to be referred to the relevant authorities or to the relevant agencies. I have obtained the consent of all members of my household for this matter.</p>					

※Applicant (parent) Signature Komaki Tarou

(back)

(space for an attached the copies)

• Those children that are on the same household but live in a different address or are dependent of the parent after reaching 18 years-old within the first March 31, please attach a copy of a document (such as gensen choushu (Withholding tax certificate), Kakutei shinkoku (tax return), etc.) and other documents .that confirms that the children are dependent of the parent. (such as student ID card, certificate of illness or disability that proves the child is not expected to earn an independent living, etc.).

Komaki Tarou
Gensen choushu
(copy)
Dependants
Komaki Hanako
Komaki Ichirou
Komaki Jirou
Komaki Megumi
Komaki Sakura

Komaki Tarou
Kakutei shinkoku
(copy)
Dependants
Komaki Hanako
Komaki Ichirou
Komaki Jirou
Komaki Megumi
Komaki Sakura

Komaki Hanako
Student ID
(copy)

Komaki Ichirou
〇〇certificate
(copy)

Space used for Komaki city (please do not write here)

給食費負担 者(保護者)	住記情報 確認	生活保護 受給確認	源泉徴収 票確認	確定申告書 確認	その他書類 確認	無償化 可否	決定・却下 通知
<input type="checkbox"/> 申請者 と同一	<input type="checkbox"/> 適	<input type="checkbox"/> 無	<input type="checkbox"/> 適	<input type="checkbox"/> 適	<input type="checkbox"/> 適	<input type="checkbox"/> 可	年 月 日
<input type="checkbox"/> その他	<input type="checkbox"/> 不可	<input type="checkbox"/> 有	<input type="checkbox"/> 不可	<input type="checkbox"/> 不可	<input type="checkbox"/> 不可	<input type="checkbox"/> 不可	

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