(Format 1)

Date:

Application for the Program for Partial Subsidization
for Using Childcare Services

To: Office for Gender Equality,
Research Organization of Information and Systems

I have used childcare services as described below. I wish to apply to use the Program for Partial Subsidization of Fees for Using Childcare Services

Applicant

|  |  |
| --- | --- |
| Name |  |
| Gender |  |
| Institution to belong |  |
| Title |  |
| Name and date of birth of the child and their relationship to the applicant |  |

Details on the applicant's use of childcare services

|  |  |
| --- | --- |
| Name of the facility used |  |
| Address and phone number of the facility |  |
| Name of the childcare provider1 |  |
| Details regarding the applicant's use of childcare services (Fill in the columns inside the thick frame only.) |
| Date of use | Name of the child | Amount of the usage fee | Reason for the applicant's use of childcare services2 | Two-thirds of the usage fee | Amount to be subsidized |
|  |  | yen |  | yen | Yen |
|  |  | yen |  | yen | Yen |
|  |  | yen |  | yen | Yen |
| Total amount to be subsidized | Yen |

1 If you have requested an individual to provide childcare services via a Family Support Center or similar entity, enter the address, contact number, etc. of the person.

2 Describe briefly why you used the childcare service.
E.g., I conducted an experiment at night, and there was no one else who could take care of my child during the experiment.

Attachments

|  |  |
| --- | --- |
| Category | Attachments |
| In the case of corporate payment | - Bill for the amount to be subsidized- Usage details of the childcare services |
| Where you pay the fee for ROIS to be reimbursed later | - Receipt- Usage details of the childcare services\* In the case of “Care for a sick child or a convalescent child,” “Night childcare or holiday childcare,” or “After-school childcare,” submit a receipt which permits confirmation of your use of such a service.\* In the case of “Childcare during a trip for an academic conference,” submit the receipt and a duplicate of the brochure for the academic conference (pages showing the name, venue, and period of the conference). |

\* Keep the master copies of this application and its attachments yourself. When applying, submit copies.
If your application is approved, submit the master copies to your institute's Office for Gender Equality.

Reason for paying the fee in advance to be reimbursed by ROIS later (where applicable)

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|  |

\* Describe how you confirmed that the facility does not accept corporate payments.
E.g., On MM DD, YYYY, I inquired with Mr. XX from YYYY Corporation, asking him about corporate contracts and payments from public funds regarding the payment of fees for using childcare services. He answered that usage fees can only be paid by direct debit from the user's account. This is why I paid the fees and require that ROIS reimburse me.