

**Hongo Keyaki Day Nursery, Shirokane Himawari Day Nursery  
Komaba Mukunoki Day Nursery, Kashiwa Donguri Day Nursery  
Occasional Daycare Registration Form**

To the University of Tokyo,

\_\_\_\_\_/yr \_\_\_\_/mo \_\_\_\_/dy

With regard to the daycare of my child, I acknowledge that I have received an explanation of important matters described in a separate document, "Day Nursery Usage Guide", and agree to abide by the nursery rules and by this writing. I do hereby apply for registration at UTokyo Day Nursery as follows.

|                                     |   |                            |
|-------------------------------------|---|----------------------------|
| Desired Entrance Date               | _____/yr ____/mo  |                            |
| Check the nurseries you want to use | Hong Keyaki   | Shirokane Himawari         |
|                                     | Komaba Mukunoki   | Kashiwa Donguri            |
| (Kana)                              |   |                            |
| Full Name of Child                  | Family Name   | Male<br>Female             |
|                                     |   | Date of Birth              |
|                                     |   | _____/yr ____/mo ____/dy   |
| Desired Childcare Days/Hours        | Mon   | : ~ :                      |
|                                     | Tue   | : ~ :                      |
|                                     | Wed   | : ~ :                      |
| Special Health Problems             | Disease   | Yes / No (Comments: _____) |
|                                     | Allergy   | Yes / No (Comments: _____) |
|                                     | Other   | Yes / No (Comments: _____) |
| Current Daycare Situation           | Parents · Relatives · Nursery ( _____ ) · Babysitter ( _____ )<br>Other ( _____ ) |                            |

|                        |  |                       |                    |              |                      |
|------------------------|--|-----------------------|--------------------|--------------|----------------------|
| (Kana)                 |  |                       | Nationality        | Relationship | Researcher ID (note) |
| Full Name of Applicant | Family Name  |                       |                    |              |                      |
| Current Address        | 〒  |                       |                    |              |                      |
| Phone                  | Home:  | Cell:                 | Labo Ext.:         |              |                      |
| Dept.                  |  |                       | E-mail             |              |                      |
| Affiliation            | Faculty / Staff / Student(grade: _____)  | Full Time / Part Time | Researcher / Other | Other        |                      |
| Current Status         | Employed · In School · Leave of Absence · Child-care Leave · Pre/Post Childbirth Leave · Pregnant<br>Other ( _____ ) |                       |                    |              |                      |

|                                 |   |                          |                              |
|---------------------------------|---|--------------------------|------------------------------|
| (Kana)                          |   |                          | Researcher ID (note)         |
| Full Name of Spouse             | Family Name                             |                          |                              |
| Place and Style of Work/ Study  | Employer's Name                         | Phone                    |                              |
|                                 | Full Time / Part Time ( _____ hr/wk)    | Researcher / Other       | Student(grade: _____) Other  |
| If at the University of Tokyo   | Dept.                                   | Labo Ext.                |                              |
|                                 | Faculty / Staff / Student(grade: _____) | Full Time / Part Time    | Researcher / Other Other     |
| Family Living at Same Residence | Name                                    | Relationship             | Date of Birth                |
|                                 |   | Self                     | _____/yr ____/mo ____/dy     |
|                                 |   | Spouse                   | _____/yr ____/mo ____/dy     |
|                                 |   | Child                    | _____/yr ____/mo ____/dy     |
|                                 |   |                          | _____/yr ____/mo ____/dy     |
|                                 |   |                          | _____/yr ____/mo ____/dy     |
|                                 |   | _____/yr ____/mo ____/dy | Place of Work/School/Daycare |

(Note) Fill in the Researcher ID provided by the Cross-ministerial R&amp;D Management System (e-Rad) if you have.

※1. Required Documents : Parents' proof of Employment or Student Status (Photocopy of Student ID is acceptable)

2. Please acknowledge it beforehand that the information described in the submitted application might be used not only for the selection but for investigation of the use state etc.

3. You are required to pay the registration fees of each registered nursery.