

援護金/祝金共通申請用・英語版

Application Form I

Date of Application: _____

Application Form for Application for Year-End Financial Support and Congratulatory Gift for Entering Elementary/Junior High School

To the President of the Hamamatsu City Council of Social Welfare

《Confirmation of Agreement》I agree to allow the social workers, child committee members and public institution to cross-reference information to confirm the contents of the application as part of the review for the financial supports. ※Filling out the form and affixing my seal also serve as confirmation of consent.

※Fill in all boxes. The application will not be processed if the documents attached are not complete.

<input type="checkbox"/> I apply for "Year-End Financial Support".				<input type="checkbox"/> I apply for " Congratulatory Gift for Entering Elementary/Junior High School".		
Furigana				Address	〒 _____ -ku	
Name					Tel. No. _____ ※Contactable during the day	
Members of Household	Relation	Name	Date of Birth (Age)	Workplace or School Name (School Year)	Income (Total Amount) (Monthly wages for July, Aug, Sept) ※ Needed for households which requires support due to financial reasons.	Elementary/Junior high school to enroll 2026※Needed for households receiving Child Rearing Allowance.
	Applicant	Applicant			7 8 9	
		Furigana: _____			7 8 9	
		Furigana: _____			7 8 9	
		Furigana: _____			7 8 9	
		Furigana: _____			7 8 9	
		Furigana: _____			7 8 9	
	Furigana: _____			7 8 9		
	Furigana: _____			7 8 9		

《Confirmation of Attached Documents》※Please tick(✓) those that apply.

A: Households with all members exempted from Municipal & Prefectural Inhabitant Tax

⇒Documents showing that all family members are exempted from tax (Any one of the following items(1,2))

- ☐Municipal & Prefectural Inhabitant Tax Certificate 2025 (for the 2024fiscal year)
- ☐ Long Term Insurance Contribution Special Collection Notification
- ☐Student ID card

Documents applying for Congratulatory Gift fo Entering School

Official Documents showing the date of birth of the child ☐Insurance Card ☐Medical Subsidy Recipient Card ☐Certificate of Residence ☐Other()

B: Households which requires support due to financial reasons (Any one of the following items(1,2,3))

- ☐Payslips from the past 3 months (July, August and September) for all members of the household.
- ☐If you recently lost a job) Letter of Unemployment (rishokuhyo) or Employment Insurance Benefits Certificate (koyo hoken jukyu shikakushasho)
- ☐If pension is your only source of income) Pension Payment Notification (nenkin furikomi tsuchisho)
- ☐Student ID card

Documents applying for Congratulatory Gift fo Entering School

Official Documents showing the date of birth of the child ☐Insurance Card ☐Medical Subsidy Recipient Card ☐Certificate of Residence ☐Other()

C: Households receiving Child Rearing Allowance

☐Child Rearing Allowance Certificate

Official Documents showing the date of birth of the child ☐Insurance Card ☐Medical Subsidy Recipient Card ☐Certificate of Residence ☐Other()

《 Reason for Application for B: Households which requires support due to financial reasons 》 Please elaborate on your reasons.

※If you fall under category B, you must fill in this section.

The personal information you have entered in the application form will be used only for the purpose of the Hamamatsu City Council of Social Welfare's activities.The information will be managed appropriately and will not be provided to a third party without permission.

Name of Representative Who Filled in the Form (If any)	法定地区名	民生委員児童委員氏名 (No)
	地区	()

* Application Deadline October 31(Fri), 2025

※Please fill in the reverse side.