

Mayor of Ichikawa City

2024(year)年 4(month)月 3(day)日

Applicant (School lunch fee burdened person)	Address	〒272-0001(postal code) 1-1-1 Yahata, Ichikawa City							
	Name in Japanese	ジョン スミス							
	Parent Name	John Smith <small>※Please handwrite in own language (Kanji or English alphabet)</small>							
	Relationship to child	father							
	Telephone number	090-9999-1111							
Child	School Name	市川市立	Yawata Elementary School	5 年(grade)	1 組(class)				
	Name in Japanese	マイク スミス							
	Child's Name	Mike Smith							
	Child's Birthday	2013 (year)年 5 (month)月 1 (day)日							
	通知書番号	9桁							

In accordance with the regulations of “市川市学校給食の実施及び学校給食費の管理に関する条例施行規則第4条第1項”, I sign up for the following.

※Please circle the number

Apply for school lunch	1	Apply for school lunch (Desired start date of school lunch 2024 (year)年 4 (month)月 1 (day)日)
	2	Don't apply for school lunch

※Please circle the number

1 When apply for school lunch		2 When don't apply for school lunch		
School lunch menu	1	All menus		
	2	All menus but excluding milk → <u>To the back side</u>		
	3	Milk only → <u>To the back side</u>		
Resident Tax Confirmation Consent Form I consent to Ichikawa City confirming the resident information, household status, and support status of myself (applicant) and members of the household to which I belong. I have obtained the consent of the members of my household regarding this matter. In addition, I receive the refund that Ichikawa City should pay me (applicant) due to overpayment, etc. If the account holder is different from me (applicant), I (applicant) accept that I (applicant) have delegated the right to receive the overpayment from Ichikawa City to the account holder. Applicant name (Please sign parent's name here) <div style="border: 1px dashed red; padding: 5px; text-align: center; color: red; font-weight: bold; font-size: 1.2em;">John Smith</div> <small>※Please handwrite in own language (Kanji or English alphabet)</small>		Reasons for not applying for school lunch	1	Food allergies
			2	Religious reasons, etc.
		3	International school, etc.	
		4	Others→ <u>Please answer in detail on the back</u>	
		【Note】 If it is difficult for your child to attend school due to special circumstances, such as physical or mental health problems, please request school lunches as "Apply for school lunch". Depending on the child's situation, please submit "様式第2号 学校給食停止・再開届 (School Lunch Suspension/Resumption Notification)".		

※If school lunches cannot be provided due to unavoidable reasons (breakdown of school lunch facilities, events, etc.), parents are requested to bring their own packed lunches. Please note that lunch boxes provided by parents are not eligible for free school lunch fees.

【Current Student】

※Fill in the current year, the name of the school, the grade, and the class at the time of submission.

- Current Student(在校生)
- Freshman(新小学1年生)
- Transfer student(転入生)
- Others ()

年度: **5**年度 学校名: 市川市立 **Yawata Elementary School** 学年・組: **4**年 **2**組

※Please circle the number

1 When apply for school lunch		2 When don' t apply for school lunch	
Please select the reason for choosing "2 All menus but excluding milk"		Reasons for not applying for school lunch Please select a detailed reason for "4 Others"	
1	Food allergy	1	Food allergies
2	Lactose intolerance	2	Religious dietary restrictions
3	Milk do not suit my body	3	Dietary restrictions due to illness etc.
4	Dietary restrictions due to illness etc.	4	Enter a private school, etc.
5	Worried about drinking milk at school lunch.	5	Transfer school outside the city
6	others (Fill out the reason specifically) ()	6	Being hospitalized or receiving home treatment due to injury or illness, etc.
Please select the reason for choosing "3 Milk only"		7	Currently not attending school
1	Food allergies	8	Attending Friend Room Ichikawa.
2	Religious dietary restrictions.	9	Attending a free school etc.
3	Dietary restrictions due to illness etc.	10	Going to an international school
4	School lunches other than milk do not suit my body.	11	Currently in a facility
5	Worried about having school lunches other than milk.	12	School lunches do not suit my body.
6	others (Fill out the reason specifically) ()	13	Worried about having school lunches.
		14	others (Fill out the reason specifically) ()