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(URL: https://logoform.jp/form/cGft/800478)



School Lunch Request Form

Mayor of Ichikawa City

Date 2025(year)年 (month)月

| | | | | | (Sub | mis | <u>sion</u> | Date | 2025 | i(year)年 | Ξ | (month)月 | (day)∃ |
|---|---|-----------------------|---|-----------|--|-------------------------|----------------------------|--|------------|-------------------|-----------------|--------------|-------------|
| Applicant (School lunch fee burdened person) | | | Address | | 〒 | | | (bos. | tal c | ode) | | Ich | kawa Cit |
| | | Name in Japanese | | | | | | | | | , ICII | Kawa CII | |
| | | Parent Name | | **Pleas | e ha | ndwri | te in o | own lan | guage (Kan | ıji or Eng | glish alphabet) | | |
| | | Relationship to child | | | | | | | | | | | |
| | | | Telephone number | | | | _ | | - | _ | | | |
| | | | School Name | | 市川市立 | | | | | | school | 年(grade) | 組(class |
| Child | | Name in Japan | | | | | | | | | | | |
| | | | Child's Nam | ne | | | | | | | | | |
| | | | Child's date of birth | | | (year)年 (month)月 (day)日 | | | | | | 3 | |
| | | | 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 | | 1 | Apply for school lunch Don't apply for school l | | | | nch | Desired start date □From the beginning of next April □From the middle of the date below; → (2025(year)年 (month)月 (day)日) | | | | | |
| | | | | | | | | | | | ₩P | lease circle | the numb |
| 1 When apply for school lunch | | | | | | | | 2 V | Vhen o | don't a | apply 1 | for school | lunch |
| School lunch menu | 1 | | l menus f you don't dr ect 2(All menus b | | | nch | 1 | Food allergies | | | | | |
| | 2 | | l menus but cluding milk | back side | Ę | school lur | 2 | Reli | igious d | dietary | restrictio | ons | |
| | 3 | Mi | lk only → <u>To the bac</u> | | back side | | 2 | 3 | Inte | ernation | nal sch | ool, etc. | |
| Resident Tax Confirmation Consent F | | | | | orm | | for so | 4 | Othe | ers→ <u>Ple</u> a | ase answ | er in detail | on the back |
| I consent to Ichikawa City confirming the resident information, household status, and dependent status of (applicant) as well as that of the members of my house through public records. I have obtained the consent of all members of my house regarding this matter. I request that the overpayment owed to me (the applic Ichikawa City be refunded to the bank account specific separately submitted bank transfer request form. I und and agree that if the account holder is different from will be considered as my delegation of my right to recoverpayment to that person. Signature (Please sign parent's name her | | | | | sehold cant) by ed in the derstand m me, thi ceive the | S | Reasons for not applying f | If a child or student is unable to attend school due to special circumstances, such as physical or mental health problems, we ask that you apply for school lunch by selecting "1 Apply for school lunch" so that school lunches can be provided when the child or student is able to attend school. And then submit "様式第2号 学校給食停止・再開届 (School Lunch Suspension/Resumption Notification Form) "according to the child or student's situation. | | | | | |

I If we are unable to provide school lunches for *unavoidable circumstance, we may ask students to bring their own packed lunches.

2 If *unavoidable circumstances arise on the day, we may be unable to provide school lunches and may be have to shorten our daily schedule and send your child home. Please note that neither 1 nor 2 will qualify for free school lunches.

(Unavoidable circumstances include; school events and circumstances, school closures, accidents or breakdowns at school lunch facilities etc..)

[Current Student]

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

%Please handwrite in own language (Kanji or English alphabet)

年度:6年度 学校名:市川市立 school 学年·組: □Current Student

□Freshman □Transfer Student □Others (

| | | **Prease cricle the number | | | | | |
|-------------|--|--|---|--|--|--|--|
| | 1 When apply for school lunch | 2 When don't apply for school lunch | | | | | |
| What but | Please select the reason for choosing "2 All menus but excluding milk" is "All menus milk (including juice and other drinks) | 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 does not agree with me | 3 | Dietary restrictions due to illness | | | | |
| 4 | Dietary restrictions due to illness | 4 | Enter a private school | | | | |
| 5 | Worried about drinking milk at school lunch | 5 | Transfer school outside Ichikawa city | | | | |
| 6 | Others (Fill out the reason specifically) | 6 | Being hospitalized or receiving home treatment due to injury or illness | | | | |
| | (| 7 | Currently not attending school | | | | |
| | Please select the reason for choosing "3 Milk only" | | Attending Support Room Friend Ichikawa | | | | |
| What | Only milk (including juice and other drinks) will be provided | 8 | | | | | |
| 1 | Food allergies | 9 | Attending an alternative school | | | | |
| 2 | Religious dietary restrictions | 10 | Going to an international school | | | | |
| 3 | Dietary restrictions due to illness | 11 | Currently in a facility | | | | |
| 4 | School lunches other than milk do not agree with me | 12 | School lunches do not agree with me | | | | |
| 5 | Worried about having school lunches other than milk | 13 | Worried about having school lunches | | | | |
| 6 | Others (Fill out the reason specifically) | 14 | Others (Fill out the reason specifically) | | | | |
| | (| | (| | | | |