Application form for the acceptance of children, May 7-15, 2020 ochildren's information (As for elementary schools, 1st, 2nd and 3rd graders only)

	grade	class	name			
	grade	class	name			
	grade	class	name			
	grade	class	name			
	grade	class	name			
oReas	Reason for application					

For the acceptance of children at schools and/or kindergartens, I declare the following.

- I take fever and check physical condition of the child/children every morning.
- If there is any health problem of the child/children, I do not make the child/children go to schools and/or kindergartens.
- The commute to schools and kindergartens is in my charge.
- I make the child/children bring lunch.
- · I make the child/children wash their hands often and well, wear masks and follow hygienic practice.
- I am available for emergency contact from schools and/or kindergartens.) Tel No. (

Guardian's Name

Stamp

D	ates and	Hours			
	Month	Date	Day	Hours	Remarks
	5	7	Thu	\sim	
	5	8	Fri	\sim	
	5	11	Mon	\sim	
	5	12	Tue	\sim	
	5	13	Wed	\sim	
	5	14	Thu	\sim	
	5	15	Fri	\sim	