日本国政府法務省

	For applica	nt, part 1						M	inistry of Just	tice, Government	of Japan	
			在留	留資格	認定証	田 書:	☆ 付 F	申 請 :	書			
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	□ N「研		□ N 「技術	Business M ・人文知識・』	国際業務」		"Researcher (T	技能」				
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14	滞在予定	期間		1 year		15 同伴	者の有無			#		
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I	Intended pla	ce to apply for vis				7: NUMBER OF 1 EPARTURE ARE			ATE OF EN	TRY/		
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申請人等作成用 2 R (「家族滞在」・「特定活動(ハ)」・「特定活動(EPA家族)」)

For applicant, part 2 R ("Dependent" / "Designated Activities(c)" / "Dependent who intends to live with their supporter whose status is Designated Activities (Nurse and Certified Careworker under EPA)")

在留資格認定証明書用

	rities (Nurse and Cer	rtified Carewor	ker under E	PA)")				For certificate of	eligibility
1 婚姻, 出生又は縁糸 Authorities where marriage, (1)日本国届出先 Japanese authorities				egistration					
届出年月日		年	月		日				
Date of registration		Year	Month	1	⊔ Day				
(2)本国等届出先 Foreign authorities	HAIDIAN DI	STRICT, B	EIJING,						
届出年月日 Date of registration	19XX	年 Year	月 Month	22	日 Day				
2 滞在費支弁方法 Method of support									
■ 親族負担		国からの追			口身	才元保記	正人負担		
Relatives □ その他(Others	Ren	nittances from	abroad		Gı	uarantor)
3 申請人, 法定代理。 Applicant, legal representat (1)氏名 Name (3)住所 Address:	tive or the authorized		e, prescribe	d in Parag)本人と	aph 2 of A		t Spouse		
Address 電話番号	phone number	in Janan			話番号	•			
Telephone No.		iii Japaii		Cellular F	hone No.				
以上の記載内容に 申請人(代理人)の			-	-			-	bove is true and of Date of filling in	
Suppo	orter in Ja	apan s	igns l	here.			年 Year	月 Month	日 Day
					人(代理	人)が変	Year	Month	Day
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扶養者等作成用 1 R (「家族滞在」・「特定活動(ハ)」・「特定活動(EPA家族)」)

For supporter, part 1 R ("Dependent" / "Designated Activities(c)" / "Dependent who intends to live with their supporter whose status is Designated Activities (Nurse and Certified Careworker under EPA)")

在留資格認定証明書用 For certificate of eligibility

1 扶養される家族(申請人)の氏名 JI. JIAOLIU Name of the family member to be supported (applicant) 2 扶養者 Supporter (1)氏 名 JING, DAGUO Name 年 月 (2)生年月日 (3)国 籍•地 域 日 1 中国 19XX Date of birth Month Day Nationality/Region (4)在留カード番号 Residence card number (6)在留期間 (5)在留資格 ex.Professor Status of residence Period of stay 年 (7)在留期間の満了日 [2 Supporter(1)-(11)] Date of expiration (8)申請人との関係(続柄) Relationship with the applican Please fill out the information ■ 夫 □妻 □父 about supporter for applicant Husband Wife Father □ 養父 □ 養母 □ その他(Foster father Foster mother Others (9)勤務先名称 Graduate School or Institution 支店•事業所名 Please leave here blank. Place of employment the supporter be ong to Name of branch (10)勤務先所在地 ※ (10)については、主たる勤務場所の所在地及び電話番号を記載すること。 Address For sub-items (10), gire the address and telephone number of your principal place of employment. Address of Graduate School or Institution the supporter belongs to 電話番号 075-753-OOXX Telephone 円 (11)年 収 0.000.000 Annual income Yen 以上の記載内容は事実と相違ありません。 I hereby declare that the statement given above is true and correct. 扶養者の署名及び押印/申請書作成年月日(印がない場合は押印省略可) Signature and seal of the supporter or guarantor / Date of filling in this form (In cases of not possessing a seal, it it possible to omit it.) (扶養者と申請人が同時に入国予定の場合,扶養者の通学先,勤務先又は所属機関名,代表者氏名の記名及び押印) In cases where the applicant is to enter Japan with a supporter or quarantor, fill in the name of the place of study, work or the organization to which the supporter or guarantor belongs and the name of the representative of such place, and press the official seal of the organization. 囙 年 月 日 Supporter signs here. Month Year Day 注意 Attention 申請書作成後申請までに記載内容に変更が生じた場合,扶養者が変更箇所を訂正し,署名すること。 印がない場合は,変更箇所に署名すること。 (扶養者と申請人が同時に入国予定の場合,扶養者の所属機関等が変更箇所を訂正し,押印すること。) In cases where descriptions have changed after filling in this application form up until submission of this application, the supporter or guarantor must correct the part concerned and press its seal on the correction. In cases of not possessing a seal, sign the corrected part. (In cases where the applicant is to enter Japan with a supporter or guarantor, the organization to which the supporter or guarantor belongs must correct the part concerned and press its seal on the correction.)