第６号様式（第１０条関係）

　　年　　月　　日

（宛先）江別市長

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| （申請者） | 住所 | | | | | | | | | | | | |
| 氏名  電話番号 |  | | | | | | | | | | | |
|  | 個人番号 |  |  |  |  |  |  |  |  |  |  |  |  |

施設等利用給付認定事由消滅届兼利用終了届

　子ども・子育て支援法第３０条の９の規定による施設等利用給付認定事由の消滅、利用終了について、下記のとおり届け出ます。

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| □１　施設等利用給付認定事由の消滅の届出 | | | | | | | | | | | | | | | | | | | □２　利用終了の届出 | | | | | | | | | | | | | | | | | | |
| 利用施設名 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| フリガナ |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
| 児童氏名  生年月日  個人番号 | 年　 月　 日生 | | | | | | | | | | | | 年　 月　 日生 | | | | | | | | | | | | | 年　 月　 日生 | | | | | | | | | | | |
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| 認定証番号 |  | | | | | | | | | | | | | | | | | 添付の有無 | | | | | | | | □有　□無 | | | | | | | | | | | |
| 届出理由 | □転居（転居先住所：　　　　　　　　　　　　　　　　　　） □その他（　　　　　　　　　　　　　　　　　　　　　　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 事由消滅  利用終了 年 月 日 | 年　　　月　　　日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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