**Attachment 2**

**Application for Fee Assistance for Hiring Babysitters and Other Childcare Service:**

**2024 Academic Year ( 2nd period)**

Date (dd-mm-yy):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director, Diversity, Equity, and Inclusion Center

I wish to apply, as follows, for fee assistance for hiring babysitters and other childcare services.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of applicant |  | |  |
| Department |  | | \*1 |
| Position  (Grad students should state their course year) |  | |  |
| Employee number  (Grad students should state their Student ID No.) |  | |  |
| On-campus contact details | Phone:  E-mail: | | |
| Name & age of child  (You may duplicate the rows if necessary.) |  | years old  Date of birth: (yyyy/mm/dd) | |
|  | years old  Date of birth: (yyyy/mm/dd) | |
| Amount you propose | \_\_\_\_\_\_\_\_yen | | |
| Have you used this program before? | (Write the year(s) in which you used the program) | | |

\*1: If conducting research in more than one department, indicate other departments in parentheses.

**1. Reasons for using a babysitter (must be completed)**

|  |
| --- |
| \* After describing your current situation pertaining to childcare, provide specific information about the need for a babysitter and how you plan to use the babysitter. |

**2. Other (optional)**

|  |
| --- |
| \* Please enter any other information that you feel requires special mention, such as whether you plan to apply for full or partial childcare leave and whether you are currently using a babysitter. |

\* You may increase the size of the cell if necessary.

**3. Service report**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Date of use | Service/Purpose | | Payment date | Amount requested (JPY) |
| Time | Payee |
| 1 | Fri., Apr. 20 | I needed to attend an orientation for new students in our graduate school (held 15:00–19:00) to brief them on the school, so I requested transport of our 2nd child from nursery to home, and babysitting at home for our 1st and 2nd children. | | Fri Apr. 20 | 5,400 |
| 18:00 – 19:30  (1.5 hours) | AAA Babysitting Inc. |
| 2 | Sun., May 13 | I needed to give a presentation on my research at the 10th Symposium on YYY in Tokyo, and my spouse, who resides in Tokyo, had to go to work, so I requested temporary childcare in Tokyo for our 1st and 2nd children. | | Thu., May 31 | 12,600 |
| 9:00 – 17:00  (8 hours) | XYZ Nursery |
| 3 | Tue., May 22 | I needed to gather information on xxx and give a presentation on my research at the 7th International Conference on ZZZ in Hong Kong (held 5/22–25), so I took our 1st and 2nd children with me and requested babysitting for them at the hotel. | | Thu., May 24 | 46,400  (3,200HKD,  TTS rate on 5/24:  14.5JPY/HKD) |
| 13:00 – 17:00  (4 hours) |
| Wed., May 23 |
| 9:00 – 18:00  (9 hours) | ABC Babysitting Service, Co. Ltd. |
| Thu., May 24 |
| 9:00 – 17:00  (8 hours) |
| 4 | Mon., June 4 | I was unable to pick up our 2nd child from nursery on time because the BBB Committee meeting I was attending ran late, so I requested a child taxi service to transport my child from the nursery to my office. | | Mon., June 4 | 1,800 |
| 18:00 – 18:30  (1 ride) | TTT Taxi |
| Total no. of services used | | 4　services | Total amount requested | 66,200JPY | |

* **Please do not list services used outside the applicable period, as they are not eligible for assistance.**
* You may be asked to provide additional documentation attesting to your service usage.
* The text in blue provides examples of how to fill out each section. Be sure to delete it when filling out the form.
* Add or delete rows as needed to accommodate the number of items you wish to list.

Instructions

* For the Service/Purpose column, describe the type of service used (babysitting, temporary childcare, etc.), which children were served, and the work-related reason why the service was necessary.
* Fee assistance is not available for regularly used services or services that charge a monthly fee and are considered within the scope of standard childcare (e.g., extended-hours childcare and after-school supervision), regardless of whether the service is provided on or off campus.
* Indicate the times of service usage in 24-hour clock time.
* For the payment date, write the date listed on the receipt. For the payee, write the name of the service provider (on-campus nurseries do not qualify).
* For each service used, attach the original itemized receipt (showing unit fees, transportation fees, etc.) and a document listing the various services offered by the provider and the hourly rate, etc. charged for them. Label these with the corresponding item number listed in your service report.

**4. Original receipt and document outlining services offered and their hourly rates, etc.**

Write the item number of the corresponding service listed in your service report

No.1

Attach original receipt made out in your full name

* Also attach a document listing the services offered by the provider and their hourly rates, etc. (such as a fee chart supplied by the provider or a printout of the relevant page on the provider’s website). Label this document with the item number of the corresponding service listed in your service report.