別記様式第1号の2(第4関係)

Appended Form No. 1-2 (related to Article 4)

Date:　　/　　/

MM/DD/YYYY

Certificate of Employment

To Executive Vice President (Kasumi campus, faculty Personnel and Public Relations),

 Hiroshima University

Employer:　 Name of Organization:

Address:

Name of Representative:

Tel:

This is to certify that the person detailed below has been employed as follows:

|  |  |
| --- | --- |
| Name of Employee | 　 |
| Place of Work(Address) | 　 |
| Start Date of Employment | MM/DD/YYYY | Job Category | 　 |
| Period of Employment\* Please specify only if the employee works for a fixed term. | From / / to / / MM/DD/YYYY to MM/DD/YYYY |
|  Work Arrangements | Full-time　・　Part-time　・　Others（　　　　　　　　　　　　　　　） |
| Number of Working Days | ＿＿ days per month＿＿ days per week (Mon., Tue., Wed., Thu., Fri., Sat., Sun.)  |
| Working Hours | From HH:MM to HH:MM\* If working hours vary depending on the day of the week, please specify. |
| Remarks |  |

\* This certificate should be prepared by the employer of the company where the worker works, not by the worker himself/herself.

\* If you make or alter the contents of this certificate without the permission of your employer, you may be charged with a crime under the Criminal Code.

（To employer）

\*As of the date of certification, if this employee has taken childcare leave, or if s/he plans to acquire the leave, please enter the (planned) start and end dates of the leave in ‘remarks’ column.