

Notification of Acquisition of Employment Insurance Qualification

Form type

14101

1. Individual number

2. Insured person's number

3. Acquisition category

1 New
2 Reacquisition

4. Name of insured person

Phonetic transcriptions in katakana

5. Name after change

Phonetic transcriptions in katakana

6. Gender

1 Male
2 Female

7. Date of birth

Era Name

year month day

(2 Taisho
3 Showa
4 Heisei)

8. Business establishment number

9. Causes for becoming an insured person

10. Wage (mode of payment monthly wage: in thousands of yen)

1 Monthly salary 2 Week 3 Day rate
4 Hourly rate 5 Other

11. Date of acquisition of qualification

4 - year month day

Era Name year month day

- 1 New employment (New Graduate)
2 New (Other)
3 Change from a day laborer
4 Other
8 Reinstatement etc. in his/her former position from which he/she was transferred (those aged 65 and over)

12. Employment pattern

- 1 Day laborer
2 Temporary worker
3 Part-time worker
4 Fixed-term contract worker
5 Seasonal Worker
6 Mariner 7 Other

13. Type of occupation

See the second page

(01~11)

14. Employment channel

- 1 placement provided by a Public Employment Security Office
2 Unaided employment
3 Placement provided by a private employment agency
4 Not grasping the fact

15. Normal working hours per week

hour minute

16. Stipulation of term of contract

1 Existence

Term of contract

Heisei

commencing on
year month dayending on
Heisei year month day

Existence or non-existence of contract renewal clause

(1 Existence
2 non-existence)

2 non-existence

Name of business establishment

Remarks

Fill out Column 17 through Column 22, only in the case of the insured person being a foreigner

17. Insured person's name (in Roman letters) (Fill out in uppercase alphabetic characters)

Insured person's name [Continued (in Roman letters)]

18. Nationality/Region

()

19. Residence status

()

20. Permitted period of residence

year month day

21. Activity other than that permitted under the residence status previously granted
Existence or non-existence of a permit(1 Existence
2 non-existence)

22. Temporary labor/Contract work Working category

1. In the case of working as a temporary worker/ a contractor mainly in a place other than the business establishment concerned
2. Column for Public Employment Security Office use

23. Type of insured person at the time of acquisition

- 1 Ordinary
2 Normally being employed for a short term
3 Seasonal worker 4 Elderly (voluntary enrollment)
5 Reinstatement etc. in his/her former position from which he/she was transferred (those aged 65 and over) etc./Elderly

24. There is no need to place a checkmark if multiple numbers have been acquired.

(If the investigation results are not identical although output of a checklist has been obtained, enter "1.")

25. Nationality/region code

Fill out a corresponding code in Column 18

26. Residence status code

Fill out a corresponding code in Column 19

Notification is hereby submitted as mentioned above pursuant to the provision of Paragraph 1 of Article 6 of the Ordinance for Enforcement of the Employment Insurance Act.

Business owner

Address

Name

Telephone number

Name and seal or signature

[Seal]

Month day, 20XX

To: Director of Public Employment Security Office

Remarks

Confirmation notice: Month day, 20XX

These sample application forms indicate the essential points and descriptive examples of registration, visa, taxation, and personnel and labor affairs that are necessary when a foreign company establishes a corporation etc. in Japan. These documents are not published by competent authorities and therefore are not official. Therefore, when going through the official procedures consult a specialist or download the official documents from the competent authorities.

The competent authorities relating to these documents: Ministry of Internal Affairs and Communications

URL: <http://www.mhlw.go.jp/file/06-Seisakujouhou-11600000-Shokugyouanteikyoku/0000088973.pdf>

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