

参考様式1の1(活動機関の名称変更, 所在地変更又は消滅)  
(Accepting organization: change in the name/address, extinguishment)

## 活動機関に関する届出 NOTIFICATION OF THE ACCEPTING ORGANIZATION

### ① 届出人 Applicant

氏名 \_\_\_\_\_ 性別 Sex 男・女 Male/Female  
Name \_\_\_\_\_  
生年月日 \_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日 \_\_\_\_\_ 国籍・地域 \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Nationality/Region \_\_\_\_\_  
住居地 \_\_\_\_\_  
Address in Japan \_\_\_\_\_  
在留カード番号 \_\_\_\_\_  
Residence card No. \_\_\_\_\_

### ② 届出の事由 (該当するものを選んでください。) Item of notification (check one of the following boxes)

活動機関の名称変更  活動機関の所在地変更  活動機関の消滅  
Change in the name of the organization Change in the address of the organization Extinguishment of the organization  
↓ ↓ ↓  
Aを記入 Bを記入 Cを記入  
to A below. to B below. to C below.

#### A 活動機関の名称変更 Change in the name of the organization

変更年月日 \_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日 \_\_\_\_\_  
Date of change \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_  
機関の名称 変更前 \_\_\_\_\_ 変更後 \_\_\_\_\_  
Name of the organization Old name \_\_\_\_\_ New name \_\_\_\_\_  
機関の所在地 \_\_\_\_\_  
Address of the organization \_\_\_\_\_

#### B 活動機関の所在地変更 Change in the address of the organization

変更年月日 \_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日 \_\_\_\_\_ 機関の名称 \_\_\_\_\_  
Date of change \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Name of the organization \_\_\_\_\_  
機関の所在地 変更前 \_\_\_\_\_  
Address of the organization Old address \_\_\_\_\_  
変更後 \_\_\_\_\_  
New address \_\_\_\_\_

#### C 活動機関の消滅 Extinguishment of the organization

消滅年月日 \_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日 \_\_\_\_\_ 機関の名称 \_\_\_\_\_  
Date of extinguishment \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Name of the organization \_\_\_\_\_  
機関の所在地(消滅時の所在地) \_\_\_\_\_  
Address of the extinct organization \_\_\_\_\_  
(Address at the time of the extinguishment)

### ③ 届出人(本人以外の者が届け出る場合に記入) Representative or agent (in case of representative, agent or other)

氏名 \_\_\_\_\_ 本人との関係 \_\_\_\_\_  
Name \_\_\_\_\_ Relationship with the applicant \_\_\_\_\_  
住所 \_\_\_\_\_ 届出年月日 \_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日 \_\_\_\_\_  
Address \_\_\_\_\_ Date of notification \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

### ④ 届出人(本人)の署名 Signature of the applicant

\_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 日 \_\_\_\_\_  
\_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

※届出人の連絡先(届出内容の確認のため, 連絡させていただく場合があります。) Contact telephone number of the applicant

電話番号 \_\_\_\_\_ 携帯電話番号 \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Cellular phone No. \_\_\_\_\_