

Date: January 31, 2020 (2nd year of Reiwa)

• Be sure to ask the operator of your subsidiary business to make a request before the start of your work period. (Entry may be based on either the Western calendar or Japanese calendar.)

Application Form for Request and Permission for Subsidiary Business

To President of Hiroshima University

Location: 1-1 XXXX-cho, XXXX City, XXXX Prefecture, 111-1111

Name: XXXXXXXX University

Representative: President XXXX XXXX (official seal omitted)

• If there is no entry for address, etc., please add them.

We shall hereby request the arrangement of your university faculty member to engage in his (her) subsidiary business as described below.

About the details of the subsidiary business (Check the boxes that apply, and fill in the table below.)

|   |
|---|
| 1. Worker for the subsidiary business<br>Name: Taro Hirodai Assigned position or affiliation: Graduate School of Integrated Sciences for Life Title: Professor  |
| 2. Official position and work content<br>Official position: Part-time lecturer<br>Work content: Lectures on “_____”   |
| 3. Period of work (scheduled) * After the days of work are decided, send a request for dispatch (the form is voluntary) separately to the head of your Department / Bureau. April 1, 2020 (or 2nd year of Reiwa) (□ Date of permission) to September 30, 2020<br>Days of work: 8:00 to 17:00 (8 hours/day) Sep. 3 to Sep. 5   |
| 4. Style of work<br><input type="checkbox"/> _ days (per year / month / week / within the period), about _ hours/day<br><input type="checkbox"/> Every ___ (day of week) From ___ to ___ (time)<br><input checked="" type="checkbox"/> Intensive course 24 hours <input type="checkbox"/> Others ( ) About _ hours/day  |
| 5. Remunerations<br><input checked="" type="checkbox"/> Some 5,000 yen (per day / hour / class / case / month / within the period / other ( ))<br><input type="checkbox"/> None (including the case only with necessary expenses. Details of the travel expenses will be separately explained in the following item.)   |
| 6. Travel expenses<br><input checked="" type="checkbox"/> Some (In the case of paying a part of travel expenses, enter the scope to be covered ( ))<br><input type="checkbox"/> None  |
| 7. Matters that you have trouble with being disclosed when a request for disclosure is made from an external party<br><input type="checkbox"/> Name of corporation, etc. (including the representative's name and business contents)<br><input type="checkbox"/> Name of official position _____ <input type="checkbox"/> Work contents _____ <input type="checkbox"/> Others ( )   |
| 8. Necessary matters such as department in charge, persons in charge, and contact information of your corporation, etc.<br>XXXX Group Hanako Hiroshima Phone: 000-000-0000 E-mail: 0000@00.jp   |
| 9. Others<br>Please check the box below only when a written reply from the President of Hiroshima University is required due to the convenience of your corporation's paperwork. * Written reply is omitted, in principle, when the subsidiary business is permitted.<br><input type="checkbox"/> A written reply from the President of Hiroshima University needed (Please enclose a self-addressed stamped envelope with your mailing address.) |

• To avoid overlapping payment for travel expenses, please ask the operator of your subsidiary business to immediately send a request for dispatch separately to the department in charge as soon as the actual days of work are decided.  
• When the days and time of work have been already clarified, attach copies of relevant documents or add a postscript to this form.

• The limit of period to be permitted is 2 years in principle. In the case of a term of office exceeding 2 years, please send materials that provide the basis for the term (such as copies of rules and articles of incorporation) as well.

• Regardless of paying any remuneration or not, be sure to ask the operator of your subsidiary business to fill in the column for the travel expenses.

\* Since the sections below are entry fields for our university, no entry is required.

Application Form for (Notification of) Permission (to be filled in by the applicant (notifier))

○ I hereby apply for permission for (report on) subsidiary business related to the request above.

Work form:  Within regular working hours  Outside regular working hours

○ Is it all right to provide information if the party of your subsidiary business requests the provision of your personnel affairs and salary information in order to confirm your personal history or payment procedure of your allowances?

Yes  No

February 12, 2020 (or the 2nd year of Reiwa) Name: **Taro Hirodai** Seal (In the case of signature, affixing a seal is not required)

There is no problem with our university regarding the matters requested from your corporation, etc.

• Be sure to go through the due formalities before beginning to engage in your subsidiary business.

[Hiroshima University personnel affairs 20-36-02-15]

February 12, 2020 (or the 2nd year of Reiwa) (Date of permission) President of Hiroshima University [Official seal omitted]

Space provided for verification by the applicant's assigned position or affiliation / bureau

(Document No.: **Integrated 20-15** Date of confirmation: **February 13, 2020**)

Field for verification by the Head Office

• The "written permission" has the date of permission and the document number.