

Report on Prior Membership (Example)

Long Term Pension Premium Number	
Your Mutual Aid Association's Seal of Approval	

It is not necessary to fill this portion in

<small>Member Name In Katakana</small>	ヒロシマ タロウ		
Member Name	ヒロシマ タロウ Hiroshima Tarou	Your Department or Faculty	
Birth Date	January 1, 1965		
	Place of Employment	Date of Employment	Termination Date
	Hiroshima City Hospital	April 1, 1998	September 30, 2001
	Prefectural University of Hiroshima	April 1, 2002	March 31, 2005
	Hiroshima University	April 1, 2008	
Please write organizations affiliated with National Public Officers Mutual Aid Association or Local Public Officers Mutual			
Employment History			

Under (2) or (7) of Section 2, Article 87, Ordinance for Enforcement of National Public Officers Mutual Aid Association Act,

I submit this report on previous membership as I mentioned above with the attached my resume.

To Chairperson of Federation of National Public Service Personnel Mutual Aid Associa Address 1—3—2 Kagamiyama, Higashi-Hiroshima-Shi
Member Name Hiroshima Tarou

