

Application form for Vaccination Certificate of COVID-19

This certificate is for deregulation of COVID-19 when travelling abroad.

This certificate is not for a domestic trip in Japan but overseas travel.

To Mayor of Ebina city Date of Application Year Month Day

①Applicant

Name	_____		
Date of birth	Year	Month	Day
Address	_____		
Phone number	—	—	_____

②Whose Certificate do you need?

<input type="checkbox"/> Yourself, the same as the applicant above. ※No need to fill out ② <input type="checkbox"/> Others ※A Power of Attorney is required.			
Name	_____		
Date of birth	Year	Month	Day
Address	〒 _____		
Phone number	—	—	_____

③Passport information

Passport No.	Date of expiry	Year	Month	Day
Former surname		Alternative surname		Alternative given name

④Planned travel destination(country/area)

Country	Area
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※Fill out this form in a ballpoint pen.

市職員 記入欄

接種券番号	_____		
必要書類確認			
必須	<input type="checkbox"/> 旅券 (パスポート)	<input type="checkbox"/> 本人確認書類	
接種記録	<input type="checkbox"/> VRS	<input type="checkbox"/> 接種済証	<input type="checkbox"/> 接種記録書 <input type="checkbox"/> 予診票
代理申請	<input type="checkbox"/> 委任状 (委任者の自署あり) <input type="checkbox"/> 代理人の本人確認書類		
旧姓等	<input type="checkbox"/> 旧姓等の本来表記文字が分かる書類		
転出後	<input type="checkbox"/> 戸籍の附票等		
交付日 (発送日)	R	<input type="checkbox"/> 窓口	<input type="checkbox"/> 郵送

発行	受付