人的支援通知書

市町様式3－5

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 配置予定人数 | 行政職員 |  | 人 | 専門職 |  | 人 | ボランティア |  | 人 |
| 施設名 |  | | | | | | | | |
| 活動予定日等 | 別添のとおり | | | | | | | | |
| 特記事項 |  | | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 市町担当  連絡先 | 課名 |  | 担当者名 |  |
| TEL |  | FAX |  |

# 専門職

市町様式3－5　別添

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No. | 氏名 | 性別 | 活動予定日 | 保有資格 | 所属・勤務先 | | | 宿泊先の確保 | 携行品 | 保険の加入 | 備考 |
| 施設名 | 所在地 | TEL |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |

# ボランティア

市町様式3－5　別添

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No. | 氏名 | 性別 | 年齢 | 活動予定日 | 保有資格 | 住所 | 電話番号 | 宿泊先の確保 | 携行品 | 保険の加入 | 備考 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |