

Name of the person appointed	
Enter one space between the first name and the family name	

Appointment date		Date of birth		Classification	1. General safety and health manager 2. Safety officer 3. Health officer (other than industrial hygienist) 4. Health officer (industrial hygiene) 5. Industrial physician				
	Y		M			D	Y	M	D
	Right align		Right align			Right align	Right align	Right align	

Duties subject to perform in the case of a safety officer or health officer		Exclusivity	<input type="checkbox"/> 1. Exclusive <input type="checkbox"/> 2. Not exclusive	If not exclusive, enter other workplace(s) assigned	
		Full time status	<input type="checkbox"/> 1. Full time <input type="checkbox"/> 2. Also performs other work	If other work is performed, describe such work	

Outline of personal history in the case of a general safety and health manager or safety officer	
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License number, etc. in the case of an industrial physician.	
	Category: <input type="checkbox"/> License number (right align)

Name of predecessor	
Enter one space between the first name and the family name	

Date of resignation, dismissal, etc.		Reference		
	Y		M	D
	Right align		Right align	Right align

Date: _____
 Name and title of employer and seal

Acceptance stamp

To: Chief of __ Labour Standards Inspection Office

Seal

Notes:

1. Do not mark, punch or fold the form because entries in the framed sections (hereinafter referred to as “entry frames”) are read by an Optical Character and Image Reader (OCIR).
2. Leave the sections and entry frames blank where there is nothing to fill in.
3. Be sure to use a black ballpoint pen to write in the entry frames, and write the letters clearly and as large as possible inside the designated frame.
4. When reporting the appointment of two or more persons at one time, fill in the total number of reports in “Total no. pages” and the page number of the relevant report in “Page no.”
For the second and subsequent pages, entries are not required for “Name of workplace,” “Type of undertaking,” “Address of workplace,” “Telephone number,” “Number of workers,” “Number of workers engaged in underground work or harmful work (the work listed in each item of Article 18 of the Enforcement Ordinance of the Labour Standards Act),” “Number of workers engaged in underground work or the work listed in item (i), items (iii) through (v) or item (ix), Article 18 of the Enforcement Ordinance of the Labour Standards Act” and “In the case of an industrial physician, number of workers engaged in the work listed in item (ii), paragraph (1), Article 13 of the Ordinance on Industrial Safety and Health.”
5. For “Type of undertaking,” select the category from those listed in each item of Article 2 of the Enforcement Order of the Industrial Safety and Health Act in the case of a general safety and health manager; select the category from those listed in item (i) or (ii) of said Article in the case of a safety officer; and select the category from major groups of the Japan Standard Industrial Classification in the case of a health officer or industrial physician.
6. For “Telephone number,” use hyphens between the area code, local telephone exchange number and subscriber number.
7. For “Duties to be performed in the case of a safety officer or health officer,” if duties are separated between the safety officer and health officer, describe their assigning tasks.
8. For “Outline of personal history in the case of a general safety and health manager or safety officer,” fill in the academic background, work experience and length of work, etc. as regards the qualification of the general safety and health manager or safety officer.
9. For “License number, etc. in the case of an industrial physician,” select the relevant code from those listed in the Appended Table.
10. For “Reference,” fill in the following:
 - (1) When appointing a general safety and health manager, safety officer, health officer or industrial physician for the first time, fill in “new appointment.”
 - (2) In the case of a report of the appointment of a safety officer and if the workplace falls under those prescribed in item (iii), paragraph (1), Article 4 of the Ordinance on Industrial Safety and Health, fill in “designated workplace.”
 - (3) In the case of a report of the appointment of an industrial physician, fill in the specialty of the physician and, if he or she is in private practice, indicate that.
11. In the case of a report of the appointment of a safety officer (excluding cases in which those listed in item (ii), Article 5 of the Ordinance on Industrial Safety and Health are appointed), a document (or a copy thereof) that certifies that the relevant person completed the training course prescribed in item (i) of said Article or other designated training course or that the relevant person has two years or more of experience as a safety officer as of October 1, 2006, must be attached. In the case of a report of the appointment of a health officer, a copy of the health officer’s license or a document (or a copy thereof) that certifies the qualification must be attached. In the case of a report of the appointment of an industrial physician, a copy of the medical license and a document (or a copy thereof) that certifies that the person falls under any of the conditions prescribed in Code 1 through Code 7 of the Appended Table must be attached.
12. A signature may be filled in lieu of filling a name and affixing a seal.