

Form No.21-5 (Related to Article 95-5)

Application for Recurrence Prevention Course for Personnel Engaged in Works Limited to Engagement

Name	
Date of birth	
Address	
Training course instructed	
Type of limited work	

Date:

Name of applicant:

To: Designated Training Institution

Notes:

1. For "Training course instructed," fill in fill in the category of the course instructed by the Director of Prefectural Labour Bureau.
2. For "Type of limited work," fill in fill in the applicable type from among those listed in each item of Article 20 of the Enforcement Order of the Industrial Safety and Health Act.
3. Attach a document describing the content of the instruction given by the Director of the Prefectural Labour Bureau.