



## K. International Preschool

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### Medical Certificate

登園許可証明書

#### A. Student information 学生情報

Name 名前:

Class 学年:

#### B. To be completed by a medical doctor 医師記入

This is to certify that the above student has been treated for, or is suffering from, symptoms of the following illness (病名又は症状)

He/She is able to return to school from the following date (登校再開可能日):

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

(e.g. Jan./1/2009)

Medical institution stamp 医療機関印

Doctor's name 医師名

Doctor's signature サイン又は医師印

Name of medical institution 医療機関名

Date 受診日 (e.g. Jan./1/2021):

/ /