**Filing of (Change in) Rules of Employment**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| XXX Co., Ltd. |  | M |  | D |  | Y |

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| To. Chief of |  | Labour Standards Inspection Office |

As we have established and changed our company's rules of employment as shown in the attachment, we would like to submit them along with a written opinion.

Main changes

|  |  |  |
| --- | --- | --- |
| Provision | Before revision | After revision |
|  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Labour insurance number | Prefecture | | Competent authority | Jurisdiction | | | Trunk number | | | | | | | Branch number | | | | | Collective business number | | | | |
|  |  |  |  |  | |  |  |  |  | |  |  |  | |  | |  |  |  |  | |  |
| Furigana (Hiragana characters) |  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Location |  | | | | | | | | | | | | | | ℡ | |  | | | | | | |
| Name of employer/title |  | | | | | | | | | | | | | | | | | | | | |  | |
| Business type/number of workers |  | | | | | | | | | | Entire company  Workplace only | | | | | | | | | | | workers  workers | |
| If the name has been changed since the last notification, enter the old name, and if the address has also been changed, enter the old address. | | | | | |  | | | | | | | | | | | | | | | | | |

**Written Opinion**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Month |  | Day |  | Year |

|  |  |
| --- | --- |
|  | (Mr./Ms.) |

We would like to submit the following opinion regarding the draft rules of employment for which an opinion was requested as of Month Day 　Year.

Opinion

|  |  |
| --- | --- |
| Name of the labour union or  title of the person representing the majority of workers  How to elect a person representing the majority of workers | Title  Name  ( 　) |