**様式第四号**(第六条関係)

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| 記入不要 | 登録番号 |  |
| 再交付年月日 |  |

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|  | 師免許証(免許証明書)再交付申請書 |

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| 登録番号 | 第 |  |  |  |  |  |  | 号 | 登録年月日 | 昭和  平成  令和 |  |  | 年 |  |  | 月 |  |  | 日 |

◎都道府県知事免許のみ記入

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| 登録  　都道府県名 |  | 都道府県 | 登録  都道府県コ－ド |  |  |

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| 本籍コード |  |  |  |  | |
| 本籍  (国籍) |  | | | | 都道府県 |

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| フリガナ |  |  |  | | |
| 氏名 | (氏) | (名) |
|  | 性別 | 男 |
| (旧姓) | (氏) | (名) |
| 女 |
| 通称名 |  |  |  | | |

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| 生年月日 | 大正  昭和  平成  令和  西暦 |  |  |  |  | 年 |  |  | 月 |  |  | 日 |  |  | | | |
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| 免許取得  資格 | 昭和  平成  令和 |  |  |  |  | 年 |  |  | 月施行第 |  |  | 回 |  | 師試験合格 |
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| 上記の |  | 師免許証(免許証明書)を(破った・汚した・失った)ので、関係書類を添えて免許証(免許証明書)の再交付を申請します。 |

年　　月　　日

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| 電話 | (　　　　) | | | | |  | |
| 住所 | 〒　　　　― | | | | | | |
|  | 都道府県 | 市  郡 |  | | | |
| 氏名 |  | | | |  |  |  |

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| 厚生労働大臣  　指定登録機関代表者 | 殿 |