

Form No.1 (Related to Article 6)

Examples of entry of numbers

0 1 2 3 4 5 6 7 8 9

Vital Statistics Survey Live Birth Form

Date	Month	Year	(Japanese calendar)	Received by municipality
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Fundamental Statistical Survey under Statistics Act.

Date	Month	Year	(Japanese calendar)	Received by health center
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Municipality code and health center code	<input type="text"/>	Branch	Health Center						
Case Book No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					

(1) Name of child Relationship with parents Male or female	Name	Legitimate child <input type="checkbox"/>	Illegitimate child <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	(2) Time of birth	Japanese calendar Year Month Date a.m. p.m. Time										
(3) Place of birth	(4) Address of child	Japan Foreign countries Prefecture City, county and special ward Town, village, and designated-city ward or general ward Municipality which is the same as the place of notification Municipality which is not the place of notification Designated-city town, aza, chome, block no., apartment or condominium and C/O Municipality code Health center code															
(5) Name of parents	Father	Mother	(6) Nationality of parents					Father Japan South Korea North Korea China Philippines Thailand USA UK Brazil Peru Other countries Unknown Mother Japan South Korea North Korea China Philippines Thailand USA UK Brazil Peru Other countries Unknown									
(7) The time when parents started living together	Japanese calendar Year Month	(8) Main occupation of the household when the child was born	1 Agriculture <input type="checkbox"/>	2 Self-employed <input type="checkbox"/>	3 Employed I <input type="checkbox"/>	4 Employed II <input type="checkbox"/>	5 Others <input type="checkbox"/>	6 Unemployed <input type="checkbox"/>	(9) Occupations of parents when the child was born	Father <input type="checkbox"/>	Mother <input type="checkbox"/>	(10) Place of child birth and its type	1 Hospital <input type="checkbox"/>	2 Clinic <input type="checkbox"/>	3 Birthing Center <input type="checkbox"/>	4 Home <input type="checkbox"/>	5 Others <input type="checkbox"/>
(11) Birth weight and height	g Unknown <input type="checkbox"/>	cm Unknown <input type="checkbox"/>	(12) Single birth or multiple birth	1 Single birth <input type="checkbox"/>	2 Multiple birth <input type="checkbox"/>	(<input type="text"/> Total number of birth children <input type="text"/> Child's order of birth)		(13) Term (weeks) of pregnancy		(14) Number of children the mother gave birth to		(15) Person who attended the birth		(16) Name of facility			
(13) Term (weeks) of pregnancy		(14) Number of children the mother gave birth to		(15) Person who attended the birth		(16) Name of facility		(17) Live Birth Form No.		(18) Fetal Death Form No.		(19) Points to be confirmed		(20) Notes			

The purpose of this survey is to prepare the Fundamental Statistical Survey under Statistics Act. A mayor of a municipality, which is the subject of this survey, has an obligation to report under the Statistics Act, and a penalty will be imposed on refusal to report or falsified report.