様式第11号（第６条関係）

**教育職員免許状書換願**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | 年 |  | 月 |  | 日 |   　　（宛先）  　　　　滋賀県教育委員会   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **滋　賀　県　収　入　証　紙**  **貼　付　欄**  （国の収入印紙ではありません）  **□　電子支払（しがネット受付サービス）の場合はチェックすること** |  | 現住所 | 〒 | | | | | | |  | | | | | | | 現勤務校 |  | | | | | | | ふりがな |  | | | | | | | 氏名 |  | | | | | | |  | | 年 |  | 月 |  | 日生 | |  | | | | | | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | わたくしは、 |  | 年 |  | 月 |  | 日付けで |  | のため身上を異動しました | | から下記により教育職員免許状を書換えていただきたいので、別紙関係書類を添えてお | | | | | | | | | | 願いいたします。 | | | | | | | | |   記 | | | | | | | | | | | | |
| 免許状の種類 |  | | | | | 記号  および  番号 | | |  | | | |
| 有効期間の満了の日または修了確認期限 |  | | | 年 |  | | | 月 | |  | | 日 |
| 異動前 | 本籍地  (都道府県のみ) | |  | | | | | | | | 都 道 府 県 | |
| 氏名 | |  | | | | | | | | | |
| 異動後 | 本籍地  (都道府県のみ) | |  | | | | | | | | 都 道 府 県 | |
| 氏名 | |  | | | | | | | | | |
| **TEL(携帯電話等)：** | |  | | | | | ※申請に対し確認を要する場合等に連絡しますので、日中に連絡がつく番号をご記入ください。 | | | | | |