様式第３号

　　　　年　　月　　日

福井県知事　様

申請者　住所

氏名

電話番号

介 護 支 援 専 門 員 登 録 事 項 変 更 届 出 書

　介護保険法第６９条の４の規定により介護支援専門員の登録事項の変更を届け出ます。

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 介護支援専門員番号 | | | | | | | | | | | | | | | | | |  | | |  | | | |  | | |  | | | |  | |  | | | |  | | |  | |
| 変 更 前 | 氏　名 |  | | | |  | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | |  | | | |  | | | |
| 住　所 | 郵便番号 | | | | | | | |  | | |  | |  | | | － | | |  | |  | | |  | | | |  | | |  | | | | | | | | | | | | | |
| 都･道　　　　　郡　　　　　　　町 村  府･県　　　　　市 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| アパート･マンション･寮の名称･号室 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 個人番号 |  | | |  | | |  | | | |  | | | |  | | | |  | | | |  | | | |  | | | | | |  | | |  | | |  | | | |  | | |
| 変 更 後 | フリガナ |  |  | | |  |  | |  | |  | | |  | | |  | |  | | |  | |  | | |  | | |  |  | | | |  | |  | |  | |  | |  | | |  |
| 氏　名 |  | | | |  | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | |  | | | |  | | | |
| 住　所 | 郵便番号 | | | | | | | |  | | |  | |  | | | － | | |  | |  | | |  | | | |  | | |  | | | | | | | | | | | | | |
| フリガナ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 都･道　　　　　郡　　　　　　町 村  府･県　　　　　市 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| フリガナ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| フリガナ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| アパート･マンション･寮の名称･号室 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 個人番号 |  | | |  | | |  | | | |  | | | |  | | | |  | | | |  | | | |  | | | | | |  | | |  | | |  | | | |  | | |

＊　変更がある事項のみ変更前・変更後の欄を記載し、それ以外の欄は斜線を引いて下さい。

＊　添付書類

　　・氏名の変更の場合

**戸籍抄本**※介護支援専門員証の書換えも必要です。

・県外から県内へ住所を変更、または県外へ住所を変更した場合

**住民票**

・個人番号に変更があった場合

**マイナンバーカードの写し（両面）**

※マイナンバーカードをお持ちでない場合は次の①および②を添付してください

①個人番号確認書類（通知カードの写しまたは個人番号を記載した住民票 等）

②身元確認書類（運転免許証の写し 等）