**中野市・山ノ内町地域公共交通対策協議会委員　応募用紙**

令和７年　　月　　日

次のとおり、委員に応募します。

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| ふ 　り 　が 　な |  | | 性　別 | 男 ・ 女 |
| 氏　　名 |  | |
| 生年月日 | 昭和・平成 | 年　　月　　日生 | 年　齢 | 歳 |
| 住　　所 | 〒　　　－ | | | |
| 電話番号  FAX | 電話番号：　　　　　　　　　　　　（固定電話または携帯電話） | | | |
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| メールアドレス | Ｅmail： | | | |
| 職　　業 |  | | | |
| 普段よく利用する公共交通機関 |  | | | |

* 裏面（もしくは別紙）に、「応募の理由」等を400字以内でご記入いただき、応募用紙と併せてご提出ください。

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| 応募の理由等 | | | | | | | | | | | | | | | | | | | |
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