**人権啓発ＤＶＤ使用申込書**

**申込時提出**

　豊中市市民協働部人権政策課長　あて

　　人権啓発ＤＶＤの使用について、以下のとおり申し込みます。

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **提出日** | | | | |  | | | | | 年 |  | | | 月 | |  | | 日 | | |
| **使用団体** | | | **名称** | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **担当者** | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **連絡先** | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **使用目的**  該当するものに○印  その他の場合は  カッコ内記入 | | |  | | | 研修 | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 試聴 | | | | | | | | | | | | | | | | | | | | | | |
|  | | | その他**（** | | | | | |  | | | | | | | | | | | | | | | | **）** |
| **使用場所** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **貸出期間** | | |  | | **年** | |  | | | **月** |  | | **日(** | |  | **)～** |  | **年** |  | | **月** |  | | **日(** | |  | | **)** |
| **使用を希望するＤＶＤの番号と題名** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1** | 番号 |  | | 題名 | |  | | | | | | | | | | | | | | | | | | | | | | |
| **2** | 番号 |  | | 題名 | |  | | | | | | | | | | | | | | | | | | | | | | |
| **3** | 番号 |  | | 題名 | |  | | | | | | | | | | | | | | | | | | | | | | |
| **4** | 番号 |  | | 題名 | |  | | | | | | | | | | | | | | | | | | | | | | |
| **5** | 番号 |  | | 題名 | |  | | | | | | | | | | | | | | | | | | | | | | |
| **その他**  連絡事項など | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |

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