

MELLERUDS KOMMUN

## Application for child care

Please send the completed form to: Melleruds kommun, Kultur- och utbildningsförvaltningen, 464 80 Mellerud. Form must be submitted 4 months before the place is required.

| Child            |               |   |      |     |
|------------------|---------------|---|------|-----|
| Surname          | First name    | Personal ID number                        | Girl | Boy |
| Address          |               | Postal address                            |      |     |
| Telephone number | Home language | Does the family have a protected address? |      |     |

| Guardian 1   |  |  |  |
|--|--|--|--|
| Personal ID number                                       |  |  |  |
|  |  |  |  |
|  |  |  |  |
| E-mail address   |  |  |  |
|  |  |  |  |
| Name of employer/school (if you are working or studying) |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Guardian 2** 

| Name   | Personal ID number                                       |
|--|--|
| Telephone number                                     | E-mail address   |
| Occupation<br>Work Study Seeking work Parental leave | Name of employer/school (if you are working or studying) |

## Type of care requested

| Pre-school      | Educational care (childminder) | Leisure time centre (before and/or after school) |  |
|-----------------|--------------------------------|--|--|
| (1-5 years old) | (1-5 years old)                | (6-13 years old)                                 |  |
|                 |                                |  |  |

## **Requested place**

| Alt.                   | . Please indicate below your request for pre-school, educational care or leisure time centre |                                     |  |
|------------------------|--|-------------------------------------|--|
| 1                      |  |                                     |  |
|                        |  |                                     |  |
| 2                      |  |                                     |  |
| 3                      |  |                                     |  |
| 5                      |  |                                     |  |
| Place                  | e required from:   | Required time per week (hours/week) |  |
|                        |  |                                     |  |
| Additional information |  |                                     |  |
|                        |  |                                     |  |
|                        |  |                                     |  |

Signature

| bighatare          | _ |
|--------------------|---|
| Place and date     |   |
|                    | _ |
| Guardian signature |   |
| Cuandian signature |   |
| Guardian signature |   |
| -                  |   |
|                    |   |

The information provided on this form will be used for planning and administrative procedures by the Department of Education and Children's Services. The party responsible for personal data is the Municipality of Mellerud's Board of Education and Children's Services. The Board is responsible for, on request, correcting, blocking, and deleting personal data in accordance with Section 28 of the Swedish Data Protection Act (PUL).

Under PUL, each registered individual is entitled to obtain information about the handling of personal data relating to the applicant once a year (Section 28 PUL). This application must be made in writing.

## Kultur- och utbildningsförvaltningen

Postadress: 464 80 MELLERUD. Besökadress: Storgatan 13 Tfn: 0530-180 00 Fax: 0530-181 01 E-post: kommunen@mellerud.se. Hemsida: www.mellerud.se Bankgiro: 5502-2776 Postgiro: 11 74 40-8 Orgnr: 212 000-1488