

APPLICATION FOR BASIC EDUCATION
AFTERNOON ACTIVITIES

School year 2021–2022

APPLICATION INSTRUCTIONS

Fill in the application form carefully. Applications forms that are not fully completed can slow down the application process. The application should be submitted online. You can also post your application to the Education Division or deliver it to our letter box on Töysäkatu 2D.

Read more at www.hel.fi/afternoonactivities.

Afternoon activities specified in the Basic Education Act are available to first and second grade pupils at comprehensive schools in Helsinki and all pupils who receive special support.

The application period is 22 March – 23 April 2021.

Admission principles

- priority will be given to first-graders and special-needs pupils.

Local service providers, their contact details and opening hours can be found on each school's website under 'Meidän koulu/Vår and 'Iltapäivätoiminta/Eftermiddagsverksamhet'. Most school website are available in Finnish or Swedish only. Link to list of school websites: <https://www.hel.fi/peruskoulut/en> See also: www.hel.fi/afternoonactivities > Locations.

If there are more applications submitted during the application period than there are places available, a draw will be held among applications of equal priority. If your child is not selected to the group you applied to, we will try to place the child in another basic education afternoon activity location in your area.

Applications that are rejected in the spring and applications that the City of Helsinki receive after the application period will be processed in the autumn in accordance with the admission principles, if new decisions are made regarding the activities.

Inquiries

Information about to afternoon activities, frequently asked questions, forms and contact details can be found on the Education Division's website at www.hel.fi/afternoonactivities.

The application is confidential insofar as it contains the kind of information detailed in section 24, subsection 25, 30 and 32 of the Act on the Openness of Government Activities.

1. CHILD'S CONTACT INFORMATION

| | | | |
|---|---|---|------------------------|
| Surname and first name(s) of the child | | First name commonly used | Social security number |
| Home address | | | Postal code and city |
| Telephone | The child's first language/mother tongue <input type="checkbox"/> 1 Finnish <input type="checkbox"/> 2 Swedish <input type="checkbox"/> Other – which? | | |
| Child's school during the school year 2021–2022 | | Child's grade level during the school year 2021–2022 | |
| The child has received a decision regarding special support <input type="checkbox"/> Yes | An application has been submitted for special support <input type="checkbox"/> Yes | The child has been granted permission for extended compulsory education <input type="checkbox"/> Yes | |

2. GUARDIAN PAYING THE INVOICE AND OTHER GUARDIAN CONTACT INFORMATION

| | | | |
|--|--|---|--|
| Surname and first name(s) of the guardian paying the invoice | | Surname and first name(s) of the other guardian | |
| Social security number | | | |
| Home address (if other than the child's home address) | | Home address (if other than the child's home address) | |
| Email | | Email | |
| Daytime contact number | | Daytime contact number | |

Continues on page 2.

3. APPLICATION FOR AFTERNOON ACTIVITIES (PLEASE SUBMIT ONLY ONE APPLICATION PER CHILD)

Afternoon activity location (school or other venue) and address

Service provider (municipality, association, parish, other)

Some locations provided activities until 4 pm.

Check the opening hours of the location on the school website, under the section 'Meidän koulu' and Iltapäivätoiminta.

 I am applying for a place for my child in afternoon activities that end at 4 pm **The customer fee is € 100 per month** I am applying for a place for my child in afternoon activities that end at 5 pm **The customer fee is € 120 per month****4. ADDITIONAL INFORMATION (COMPLETE IF NECESSARY)**

To be taken into account regarding the child's afternoon activities

 Attachments included, such as an expert opinion from a medical expert or a social worker.

Notes on the child's health (indicate allergies or medication)

5. GUARDIAN'S SIGNATURE (GUARDIAN PAYING THE INVOICE)

Date and place

Guardian's signature and printed name

TO BE COMPLETED BY THE PERSON RECEIVING THE APPLICATION

Date of filing the application

Recipient and activity unit

TO BE COMPLETED BY THE PERSON PREPARING THE DECISION Positive decision, 4 pm Positive decision, 5pm Negative decision

Start date

Service provider

Afternoon activity location

Reasons for the decision (use an appendix if necessary)

Date of proposal

Signature of the representative of the afternoon activity location