

Date

To be completed by the social services, health care and rescue services division

Unit
Workplace
Social instructor/customer advisor in informal care support
Validity

To be completed by the substitute caregiver

Last name and first names of the substitute caregiver
Personal identity code
Address
Telephone at home/work
Tax card The substitute caregiver has submitted a tax card Yes No If the substitute caregiver has not submitted a tax card, the tax withholding rate is 60%
Last name and first names of the informal caregiver
Last name and first names of the person to be cared for
Personal identity code of the person to be cared for
Dates of the temporary post

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Units (holidays used)
Total

Signatures

Place and date
Signature and name in block letters of the substitute caregiver

Place and date
Signature and name in block letters of the informal caregiver

Place and date
Signature and name in block letters of the office secretary/customer advisor in informal care support

By signing this form, the informal caregiver confirms that they have had their days off in accordance with the indicated times.

Submission of work specifications

For persons under the age of 65

The substitute caregiver must submit the specifications to the office secretaries of the unit that granted the informal care support no later than three months after the first period of substitute caregiving specified. If the work specifications are submitted later, the City of Helsinki is not obliged to pay the fee.

Kallio Virastotalo
Office secretary of informal care
P.O. Box 6009
00099 City of Helsinki

For persons over the age of 65

The substitute caregiver must submit the specifications to an employee of the unit that granted the informal care support no later than three months after the first period of substitute caregiving specified. If the work specifications are submitted later, the City of Helsinki is not obliged to pay the fee.

Notification of changes to the substitute caregiver's bank account details

The substitute caregiver must use a separate notification form (303-300) to report any changes to the account into which the substitute care fee is to be paid. The form must be sent via secure email OR left in person at the unit that granted the informal care support, and the substitute caregiver must prove their identity when doing this.