

<input type="checkbox"/> <b>Part-time care</b> <input type="checkbox"/> <b>Full-time care</b> <input type="checkbox"/> <b>Open early education activity</b> <input type="checkbox"/> <b>Free pre-school instruction</b>	<b>Day-care Unit fulfill</b>	
	Application received	Two-week arrangement period expires on:
	Signature	Four-month arrangement period expires on:
<b>Child's personal details</b>		
Surname	First names	Identity number
Street address	Post code	Post district
Home tel.	Sex <input type="checkbox"/> girl <input type="checkbox"/> boy	Mother tongue
<b>Details of guardian</b>		
Surname	First names	Identity number
Profession	Working hours per day from _____ to _____	Shift work <input type="checkbox"/> 2-shift <input type="checkbox"/> 3-shift
e-mail address:		
Place of work/study	Work address	
<b>Details of spouse</b>		
Surname	First names	Identity number
Profession	Working hours per day from _____ to _____	Shift work <input type="checkbox"/> 2-shift <input type="checkbox"/> 3-shift
e-mail address:		
Place of work/study	Work address	
<b>Family details</b>		
Parental circumstances <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> widow <input type="checkbox"/> divorced <input type="checkbox"/> separated <input type="checkbox"/> cohabiting <input type="checkbox"/> other guardian <input type="checkbox"/> registered partnership		
Guardianship <input type="checkbox"/> sole guardianship <input type="checkbox"/> joint guardianship <input type="checkbox"/> child placed in foster care		
Children under the age of 18, names and identity numbers		
<b>Form of day-care</b> (primary form of day-care should be marked with 1)		
Name of day-care centre	Alternative day-centre	Open early education activity <input type="checkbox"/> Family Group (once a week) <input type="checkbox"/> Toddler Group (twice a week) <input type="checkbox"/> Mini-school Group (3 times a week)
Day-care district	Alternative district	
Need for full-time care hrs Need for part-time care hrs	Need for shift care <input type="checkbox"/> irregular <input type="checkbox"/> 2-shift <input type="checkbox"/> 24 hrs per day <input type="checkbox"/> weekend care <input type="checkbox"/> evening care	

Need for care	
Need for day-care/pre-school/open early education commences as of	Car available <input type="checkbox"/> yes <input type="checkbox"/> no
Details of child's health	
Allergies, illnesses or other disabilities	
Is the child on permanent medication? <input type="checkbox"/> no <input type="checkbox"/> yes, please specify	Expert statement <input type="checkbox"/> attached
Family pets	
Does the family have a pet? <input type="checkbox"/> no <input type="checkbox"/> yes, please specify	
Additional information:	
Signature	
I confirm that this information is correct and i consent to it being verifield.	
Place and date	Parent's signature
<b>INCOME DATA WILL BE REQUESTED ON A SEPERETE INCOME FORM ONCE DAY CARE HAS STARTED.</b>	
<b>PROCESSING OF CLIENT INFORMATION</b> Section 24 of the Personal Data Act 523/99; Section 13 of the Act on Status and Rights in Social Welfare Services The Day-care Unit of the City of Oulu collents client information for a day-care customer database. The database consists of application documents and attachments in paper-format and also an electronic system. More information about this register and the available personal data revision request forms can be obtained from Early Education service team, tel. +358 (0)8 558 45300, e-mail: educare@ouka.fi	