## CITY OF HELSINKI

Education Division, Basic Education



## **BASIC EDUCATION AFTER-SCHOOL ACTIVITIES** APPLICATION School year 2024-2025

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

Applications for after-school activities under the Basic Education Act can be applied for pupils in grades 1 to 2 and pupils with special needs in all grades in the city's comprehensive schools.

If you send an application during the school year, your application is left waiting for possible free places in afterschool activities, and we will be in touch with you if we can arrange a place for your child.

See instructions for applying for school year 2024-2025 <a href="https://www.hel.fi/en/childhood-and-education/basic-edu-">https://www.hel.fi/en/childhood-and-education/basic-edu-</a> cation/morning-and-after-school-activities-clubs-and-hobbies/after-school-activities

Post the paper application to Education Division, After-school activities, P.O. Box 58300, 00099 City of Helsinki or deliver it to our letter box at Työpajankatu 8, 00580 Helsinki. The sender of the application must ensure that the document arrives at the authorities within the specified time limit. (Administrative Procedure Act 17§).

Child's contact information			
Surname of the child	First name(s) of the child		
Social security number			
Home address		Postal code and City	
Child's school during the school year 2024-2025		Child's grade level during the school year 2024-2025  ☐ 1 grade ☐ 2 grade ☐ 3-9 grade student who needs special support	
Child's need for special support			
☐ The child has received a decision rega☐ The child has been granted permission	arding special support n for extended compuls	☐ An application has bee ory education	en submitted for special support
If the child is in a special needs class teducation  ☐ Autism education (EAU) ☐ Education of pupils with developmental ☐ Education of pupils with severe developmental	al disabilities (POY)		, please select the right form of
Guardian paying the invoice cathe forms is considered to be	ontact information	on/The guardian v	vho has signed
Surname of guardian paying the invoice			Social security number
Home address, if other than the child"s	home address		
Email		Daytime contact number	
		I	
Other guardian contact inform			
Surname of the other guardian		e other guardian	Social security number

Home address, if other than the ch	nild's home address		
Email		Daytime contact number	
Application for after-school Please submit only one applement of After-school activity location and Malmi Comprehensive School, Pohjo	lication per child. service provider e.g an exam	ple of an after-school activity location and organizer:	
After-school activity location, addr			
	ervice Map or via afteı	Service Map. Browse the after-school -school activities' webpages at	
☐I am applying for a place for my	child in after-school activities that end at 4 pm. The customer fee is € 100 per month		
☐I am applying for a place my child	d in after-school activities that end at 5 pm. The cuostomer fee is €120 per moth		
Additional information Information about the child's phys details about any assistive devices		I impairments and hearing impairments, as well a	
Consent  ☐ I give my consent to the storin Helsinki *) morning and after-scho		in accordance with the file descripition of the City of en	
considered to be the guard	dian paying the invoic	e guardian who has signed the forms is	
Date	Signature and printed name		
To be completed by the pe		plication	
Date of the filing the application	Recipient and activity unit		