

APPLICATION FOR BASIC EDUCATION
AFTERNOON ACTIVITIES
2018–2019 school year

APPLICATION INSTRUCTIONS

Please complete a separate application for each child. The application can be filled in with a ballpoint pen or on a computer. An electronically filled-in form must be printed out and signed. The form is to be submitted to the activity venue you are applying to.

Afternoon activities specified in Chapter 8 a of the Basic Education Act are available to first and second grade pupils at comprehensive schools in Helsinki and also to pupils of all grades who receive special support.

The application period is January 24 – April 27, 2018.

Admission principles

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

The brochure presenting the afternoon activities in the school district details the activity providers of the district and their contact information and indicates their hours of operation. Brochures are available at schools during enrolment and, for schools maintained by the City of Helsinki, on the Education Division's website www.hel.fi/afternoonactivities > Locations

If more applications are submitted within the set period than the number of 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 him or her in one of the other basic education afternoon activities venues in your area.

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

Additional information


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

The application is secret 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. DETAILS ABOUT THE CHILD

Surname and forenames of the child		Name used by the child	Personal identification number of the child
Street address			Postal code and city
Home phone number	Language that the child speaks best <input type="checkbox"/> 1 Finnish <input type="checkbox"/> 2 Swedish <input type="checkbox"/> Other – which?		
Child's school during the 2018–2019 school year		Child's grade level during the 2018–2019 school year	
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	

2. INFORMATION ON THE GUARDIAN WHO WILL PAY THE INVOICE AND ON THE OTHER GUARDIAN

First name and surname of the guardian paying the invoice	First name and surname of the other guardian
Personal identification number	
Invoicing address (if different from the child's)	Home address (if different from the child's)
E-mail address	E-mail address
Daytime contact number	Daytime contact number

Continues on page 2.

3. APPLICATION FOR AFTERNOON ACTIVITIES (ONLY ONE APPLICATION CAN BE SUBMITTED PER CHILD)Activity venue and provider of the activity you are applying to
(Education Division, congregation, organisation, other)

Address of the activity venue

At some of the venues, activities will be provided until 4:00pm rather than 5:00pm. These include the Finnish-language groups arranged by the Education Division or congregations. Check the opening hours of the desired venue by consulting the district brochure.

 I am applying for a place for a child in afternoon activities that end at 4:00pm **The customer fee is €100 per month** I am applying for a place for a child in afternoon activities that end at 5:00pm **The customer fee is €120 per month****4. ADDITIONAL INFORMATION (COMPLETE IF NECESSARY)**

Things to consider regarding afternoon activities

 Attachments may include, for example, an expert opinion from a doctor or social worker

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

5. GUARDIAN'S SIGNATURE

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 venue

TO BE COMPLETED BY THE PERSON PREPARING THE DECISION Positive decision, 4:00pm Positive decision, 5:00pm Negative decision

Date From

Provider of the activity

Activity venue

Grounds for the decision (use an attachment if necessary)

Date of proposal

Signature of the representative of the activity venue