

## Family and Income Report

Date \_\_\_\_\_

In order to get a place in PAL, information about the family income is required, Fill in the information below and hand it in together with a PAL application form.

Parent or guardians name and address.			Parent or guardians name and address.		
Personal number	Home telephone	Work phone	Personal number	Home telephone	Work phone
<input type="checkbox"/> Employed	<input type="checkbox"/> Student	<input type="checkbox"/> Parent leave	<input type="checkbox"/> Employed	<input type="checkbox"/> Student	<input type="checkbox"/> Parent leave
<input type="checkbox"/> Self employed	<input type="checkbox"/> Unemployed, certificate from A-kassa attached		<input type="checkbox"/> Self employed	<input type="checkbox"/> Unemployed, certificate from A-kassa attached	
Employer/Company/School			Employer/Company/School		
Marital status					
<input type="checkbox"/> Married and living together		<input type="checkbox"/> Married and living separately		<input type="checkbox"/> Unmarried, living together	
				<input type="checkbox"/> Single	

### Child's Information (Fill in for your child placed in PAL as well as any siblings) Note: Obligatory information!

Child's first and last name	Personal number	Placement: Name of child's care facility. (Day car, after school care, etc.)

### Monthly income before tax

	Parent/Guardian #1: Income per month	Parent/Guardian #2: Income per month
Gross income, including vacation remuneration and other remunerations related to employment	Date: _____ _____	Date: _____ _____
Foster parents remuneration	_____	_____
Income from employment abroad (Included while a joint household is maintained, even if you are a resident of another country.)	_____	_____
Income from pension (excluding child's pension)	_____	_____
Taxable annuity income	_____	_____
Parental leave or illness remuneration	_____	_____
Child care remuneration (tax-exempt portion)	_____	_____
Unemployment benefits	_____	_____
Activity remuneration	_____	_____
Activity support grant	_____	_____
Base amount (from Alfa-kassa)	_____	_____
Study support received with regards to employment training.	_____	_____
Family support funds for military service	_____	_____
<b>Total to be used to calculate child care fees:</b>	_____	_____

Receiving financial support under the Social Services Act  Yes

Yes

No income declaration. I / We accept the highest fee amount.

Yes

The information in this form will be registered in a database. The information will be treated in accordance with the Swedish personal information laws. (PUL)

### Declaration and signature

I hereby declare that the information contained in this form is correct. I have read the rules regarding child care fees. (Barnomsorgstaxa). I am aware of my duty to report any changes that can effect my child care fees and I agree that the information herein may be verified with my employer or relevant government agency.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Administrator:

Telephone: