



Application for childcare

Your application form shall not be sent to us earlier than nine months before the placement date.

Please note! Use one application form per child.

You can also send your application electronically. You find this service at our website:

www.karlskrona.se/Sjalvservicetjanster/Barnomsorgens-webbtjanst/

Send the form to: Kunskapsförvaltningen, 371 83 Karlskrona

Child

Child's first name	Child's surname	Personal identity number
Address		Postal code and postal address
Privacy/confidentiality marked student <input type="checkbox"/> Yes <input type="checkbox"/> No		Kön <input type="checkbox"/> Female <input type="checkbox"/> Male
If other mother tongue than Swedish, state which language		

Adult living at the same address as the child

Guardian of the child <input type="checkbox"/> Yes <input type="checkbox"/> No	If not a guardian, enter the relationship with the child	
First name	Surname	Personal identity number
E-mail	Phone number	
Employer/school	Phone number at work/school	
Current data at the time of the child's placement <input type="checkbox"/> Job <input type="checkbox"/> On parental leave <input type="checkbox"/> Student <input type="checkbox"/> Job seeking		

Guardian of the child <input type="checkbox"/> Yes <input type="checkbox"/> No	If not a guardian, enter the relationship with the child	
First name	Surname	Personal identity number
E-mail	Phone number	
Employer/school	Phone number at work/school	
Current data at the time of the child's placement <input type="checkbox"/> Job <input type="checkbox"/> On parental leave <input type="checkbox"/> Student <input type="checkbox"/> Job seeking		

Fill in only in case of joint custody, concerns only parent not living with the child

First name	Surname	Personal identity number
E-mail	Phone number	
Employer/school	Phone number at work/school	

2022-09-26



New placement Transfer Allmän förskola, september-may

Alternative	Desired placement	Pre-School	Childcare for Schoolchildren	Holiday childminding
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Placement in childcare as from, date	Number of childcare hours per week
Period of time the application relates to <input type="checkbox"/> Daytime <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends <input type="checkbox"/> Nights	

Signature

Date	Date
Guardian, signature	Guardian, signature
Printed name	Printed name

Information on the processing of personal data: www.karlskrona.se/personuppgifter.