



Kajaanin kaupunki

Varhaiskasvatus

- Early childhood education application
- Service voucher application
- Enrollment in pre-primary education
- Early childhood education application

The form shall be returned to the following address. Early childhood education
 Pohjolankatu 13, 87100 Kajaani

Received date	Recipient
---------------	-----------

* Fields marked with an asterisk are mandatory

Child's information	Last name *	First name *	Personal identification number *	Language of communication (unless Finnish) *
Living with the child	Guardian		Guardian/other spouse living in the same household	
	Last name *	First name *	Last name	First name
	Personal identification number *		Personal identification number	
	Phone number *		Phone number	
Other family members under 18 years old (fill in only if the family does not have a Finnish personal identification number)	Names and birthdates			
Child family situation	The child lives <input type="checkbox"/> At the guardian's place <input type="checkbox"/> At the other guardian's place			
Early childhood education time	<input type="checkbox"/> 0-84 h/month <input type="checkbox"/> 85-107 h/month <input type="checkbox"/> 108-147 h/month <input type="checkbox"/> 148 h/month or more			
The need for shift care	<input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/> Night <input type="checkbox"/> Early morning at: <input type="checkbox"/> Latest evening at:			
Early childhood education/ pre-primary education location preferences *	1.			
	2.			
	3.			
Child possible support need	(Possible medication, therapies, etc.)			
More information application as a basis				
Income information *	To determine the payment, the family's income information must be provided or consent to the highest payment must be given within two weeks at the latest. the start of early childhood education through eVaka. If the family does not have the opportunity for electronic transactions, the information can also be provided to the address: City of Kajaani/early childhood education, Pohjolankatu 13, 87100 Kajaani <input type="checkbox"/> Will be provided <input type="checkbox"/> We agree to the highest payment			
Guardian signature	I assure that the information is correct			
	Place and date		Signature	

Post
 PL 133
 87101 Kajaani

Visiting address
 Pohjolankatu 13
 87100 Kajaani

Phone
 08 61 551

Email
 ka.varhaiskasvatus@kajaani.fi