



More information is available at www.kela.fi/pension



Please make sure to complete the form carefully.
Attach all necessary documentation.



If you have questions, please call our customer
service number (www.kela.fi/call-kela).

We may contact you for further information if necessary.

Send the application and any supporting documents by
mail. The address is Kela, PL 10, 00056 KELA.

i The child increase can only be granted for children under 16 years of age.

If you have not previously claimed benefits from Kela and you have moved to Finland, also complete form Y 77e.

If you are about to travel abroad, also complete form Y 38e.

When to apply: Child increase can be granted retroactively for a maximum of 6 calendar months from the date of application.
The benefit is always granted as of the first day of the month.

1. Applicant

Personal identity code Family name and given name

Phone number

E-mail

i Kela retrieves address data from the population data system. If you are resident in some other country than Finland, please state your address at section 8 Additional information.

2. Bank account number

3. Application

I wish to apply for child increase I wish to apply for a review of the child increase. Go directly to section 6.

4. Children

State your and your spouse's children who live in your household.

i Spouse means a person married to, cohabiting with or living in a registered partnership with the applicant.

Personal identity code Family name and given name Indicate the starting date.

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

State your children who live elsewhere.

i Child increase can only be granted if you have costs amounting to at least the child maintenance allowance per month.

Personal identity code Family name and given name Country of residence

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Do you have costs for the maintenance of the child? No Yes. See section 7. Enclosures.

State the children who are privately placed in your care under the Child Welfare Act.

Personal identity code Family name and given name

<input type="text"/>	<input type="text"/>
----------------------	----------------------

5. Pensions and compensations

Benefits received from Kela or from authorised pension providers need not be reported.

Do you receive or have you applied for a pension or compensation from outside Finland?

Do not receive/Have not applied

Application pending; indicate the benefit and the payer. _____

I receive a pension or compensation. See section 7. Enclosures.

6. Review of the child increase. Only complete if you are applying for a review of the child increase.

Tick the most appropriate alternative and write the requested information.

My child does not live in the same household, but I have costs for the maintenance of the child. See section 7. Enclosures.

Personal identity code Family name and given name

Indicate the starting date.

My child does not live in the same household, and I do not have any costs for the maintenance of the child.

Personal identity code Family name and given name

Indicate the starting date.

My spouse's child no longer lives in the same household.

Personal identity code Family name and given name

Indicate the starting date.

The private placement of the child under the Child Welfare Act in my household has ended.

Personal identity code Family name and given name

Indicate the starting date.

7. Enclosures

Section 4. Children

Child maintenance agreement or other documentation on the costs.

Section 5. Pensions and compensations

Decision on pension or compensation from abroad.

Section 6. Review of the child increase

Child maintenance agreement or other documentation on the costs.

8. Additional information - write the number of the section you are referring to.

Additional information on a separate sheet. Write your name and personal identity code on the sheet.

9. Signature

I declare that the information I have given is true and accurate. I will notify any changes.

Place and date

Signature

Information obtained for the purpose of deciding the present matter may be used for other benefit-related matters, if so required under law. Any information obtained within the context of another benefit may also be used to decide the present matter.

Please contact us for more information about which outside sources we may access to obtain additional information about your circumstances and to whom we may provide such information.