



You can also file the application online at [www.kela.fi/asiointi](http://www.kela.fi/asiointi) (in Finnish) or [www.fpa.fi/etjanst](http://www.fpa.fi/etjanst) (in Swedish).

More information is available at [www.kela.fi/family](http://www.kela.fi/family)



Please make sure to complete the application carefully. We may contact you for further information if necessary. You can send the application by mail [www.kela.fi/mail](http://www.kela.fi/mail)



If you have questions, please call our customer service number [www.kela.fi/phone-services](http://www.kela.fi/phone-services)

- i** If you have not previously claimed benefits from Kela and have moved to Finland, also complete the Y 77e form. If you are about to travel abroad, also complete the Y 38e form (see the form for instructions).

**When to claim:** You can apply 6 calendar months retrospectively. Child benefit and single-parent supplement can be awarded from the beginning of the month following the birth of the child or the change in family circumstances.

### 1. Applicant

Personal identity code

Family name and given name

Phone number

E-mail

- i** Kela retrieves address data from the population data system.

The applicant is the child's

parent/guardian  foster caregiver  someone else. Please specify: \_\_\_\_\_

### 2. Account number

- i** Child benefit will be paid into the same account for all of the eligible children. If you have an account with a foreign bank, please also state the **BIC code** of your bank.

### 3. Application

This application is for

child benefit, starting from \_\_\_\_\_

single-parent supplement, starting from \_\_\_\_\_

- i** You are entitled to a single-parent supplement if you are not married or cohabiting or if you and your spouse/partner are legally separated. Please also complete section 5.

I ask that the single-parent supplement be terminated. **i** Please also complete section 5.

If the recipient changes, to whom has the child benefit been paid before this application? **i** Please also complete section 9.

### 4. The children whom the application concerns

Family name and given name

Date of birth and foreign personal identity code, if applicable.

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## 5. Family circumstances

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I am separated from my spouse/partner since \_\_\_\_\_. Reason for separation:

Reason for separation:

End of a couple relationship

Former spouse's/partner's name and personal identity code

Other reason. Please specify: (such as education or work in another town or outside Finland)

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I am cohabiting/married since \_\_\_\_\_

New spouse's/partner's name and personal identity code

**i** Single-parent supplement will be terminated as of the beginning of the month following the change in family circumstances.

## 6. Move and payments from abroad

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Do you or your spouse/partner receive a benefit corresponding to the child benefit from some other country or do you receive some other benefits from abroad?

No  Yes. Please indicate the country of origin and the amount of the benefit.

\_\_\_\_\_  
Name of the institution that pays the benefit

I have moved to Finland/the children have moved to Finland \_\_\_\_\_

From which country? \_\_\_\_\_

The children are living or staying abroad. Please indicate the country and who the children are living or staying with.

\_\_\_\_\_  
Spouse's/partner's name and Finnish personal identity code/foreign personal identity code/date of birth

\_\_\_\_\_  
Spouse's/partner's /family's address abroad

Are you or your spouse/partner/the person with custody of the children employed abroad?

No  Yes. Please state which one of you and in which country.

I will move abroad/the children will move abroad \_\_\_\_\_

## 7. The Åland Islands

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The children moved to the Åland Islands on \_\_\_\_\_

The children moved from the Åland Islands on \_\_\_\_\_

## 8. Signature

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

Place and date

Signature

## 9. Consent

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**I consent to the payment of the child benefit to the person identified in section 1.**

**i** The child benefit cannot be paid to two persons at the same time. If the recipient is changed retroactively, the child benefit will be reclaimed from the previous recipient. Kela will ask for the consent of the previous recipient if it is not given here.

Place and date

Signature and personal identity code of the person giving consent

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 Kela 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.