## Permission to order an EU Disability Card



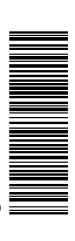
This form and its enclosure as well as the processing of the application in the ordering system result in two personal data registers. One register is formed at Kela and one at the administrator of the card ordering system, i.e. the Disability Card Office (www.vammaiskortti.fi). More information on the processing of personal data at Kela is available at www.kela.fi/data-protection.

	at www.kela.fi/data-pro	tection.	
1.	Applicant		
Personal identity code		Family name and given name	
Add	Iress		
Postal code		Postal district	
Tele	ephone	E-mail	
<b>①</b>	The e-mail address is compulsory information. When needed, you can state the e-mail address of a close relative or your support person. A link to confirm the order of a Disability Card will be sent to you to this address.		
2.	Application		
<b>①</b>	Information on the type	es of decision that entitle to an EU Disability Card is available at www.kela.fi/disability-card.	
l wi	sh to apply for permission	on to order an EU Disability Card	
	on the basis of a decision	on made by Kela	
	on the basis of some ot	her decision than a decision made by Kela (please enclose a copy of the decision with this form)	
3.	Symbol A		
l wi	sh to have a symbol A o	n my card, i.e. a marking about the need of an assistant.	
	Yes No		
4.	Statement of conse	ent	
<u>(i)</u>	Please give your consequence your order for a card card	ent to the processing of your personal data, so that Kela can grant permission to order the card and an be processed. You can withdraw your consent at any time by informing Kela about it.	
	process my persor that I have applied Disability Card Offi	onsent to Kela, the Disability Card Office and the parties administering the card ordering system to hal data for the purpose of granting me an EU Disability Card and exchange information to the effect for an EU Disability Card. The contact information stated in the application may be released to the ice and the parties administering the card ordering system for the purpose of granting and ordering card. However, information on the grounds for the application for permission to order an EU Disability	

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Card and the contents of the decision may not be released.

5. Power of attorney				
I hereby authorise the following person to order the EU Disability Card on my behalf. I give my consent to the release of all the information on the application form to the authorised person. If the authorised person needs more detailed information on the decision on the basis of which I am applying for an EU Disability Card, only the information necessary for the granting of the EU Disability Card may be released to the authorised person.				
Family name and given name	Personal identity code			
6. Enclosures				
Section 2. Application				
Copy of the decision on the basis of which you are applying for been issued by Kela, the decision need not be enclosed.	permission to order an EU Disability Card. If the decision has			
Section 3. Symbol A				
Copy of the decision on the basis of which you are entitled to heen issued by Kela, the decision need not be enclosed.	nave the symbol A on the EU Disability Card. If the decision has			
7. Signature				
Place and date Signature and printed name				
8. Person helping the applicant to complete the form				
Complete this section if someone else has helped you complete the form.				
Name and telephone number				



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