Kela[©]

Information form
Private day care allowance
Day care provider

		Day care provider
	e application and related ine: www.kela.fi/english.	Send the application and any supporting documents by mail. The address is Kela, PL 10, 00056 KELA.
This form is to be com contract of employment		early childhood education and day care providers engaged under a
	hildhood education	
Private provider of early ch	ildhood education	
Day care centre		
Family day care provid	er	
Group family day care	and and an an an and a state of the	
Day care provider enga	aged under a contract of employ	yment
	D (Y-tunnus / FO-nummer) if yo only your personal identity code	ou have one. If you are a day care provider engaged under a contract e.
Business ID or personal ide	entity code Type of company	
Care provider's name		
Street address		
Postal code	Postal district	
Name of the person in cha	rge of the case	
Phone number	E-mail	
If the provider of early allowance paid to the	childhood education has not be	een entered in the tax withholding register, Kela withholds taxes on the
•		ed in the tax withholding register?
Yes No		· · · · · · · · · · · · · · · · · · ·
2. Payment details		
Bank account number		
Reference number		
3. Claimant		
Name of claimant (parent c	or other legal guardian)	Date of birth

 Details on early childhood edu In this section, report all children in t 	the same fa		-
The day care fee must be reported a contract of employment.	as the actu	al total amount per child as specified	d in the day care agreement or the
1. Name of the child			Date of birth
Early childhood education starting from _		or for the period	
Day care fee	€/month.		
Time in early childhood education		hours per week.	
2. Name of the child			Date of birth
Early childhood education starting from _		or for the period	
Day care fee	€/month.		
Time in early childhood education		hours per week.	
3. Name of the child			Date of birth
Early childhood education starting from _		or for the period	
Day care fee	€/month.		
Time in early childhood education		hours per week.	
4. Name of the child			Date of birth
Early childhood education starting from _		or for the period	
Day care fee	€/month.		
Time in early childhood education		hours per week.	
5. Name of the child			Date of birth
Early childhood education starting from _			
Day care fee	€/month.		
Time in early childhood education			

Is a day care fee or provider wag	vage during holidays
Yes No	
Period of holiday	
Amount of day care fee	€.
6. Notification to the muni	icipal authorities or approval of the Regional State Administrative Agency
Have the municipal authorities be care as specified in the Act on Ch	een notified as regards the operations of the day care centre, family day care or group family day hildren's Day Care?
Yes, a notification has been r	nade on
To which municipality?	
A notification will be made lat	er.
To which municipality?	
Has a private day care centre tha Agency?	at started operations after 1 January 2023 been approved by the Regional State Administrative
Yes, approval was granted or	n
No	
7. Approval of the municip	pal authorities
Details filled in by the munic contract of employment. Even	cipal authority. This section is completed only if it concerns a day care provider engaged under a ery new contract of employment is approved separately by the municipality.
The municipal authority has appr employment.	roved payment of the allowance to a day care provider engaged under a contract of
Yes. When?	
	en approved in the municipality for the period
	een approved in the municipality for the period
A contract of employment has be	
A contract of employment has be	

(i) Write the number of the section you are referring to.

9. Signature of the provider of early childhood education

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

(i) The provider of early childhood education is liable to report any changes in the day care of the child.

Place and date

Signature and printed name