

HYVINVOINTILOMAT RY

Haapaniemenkatu 14, 00530 Helsinki | Tel. 010 830 3400 (Mon-Fri klo 9 am - noon) toimisto@hyvinvointilomat.fi | www.hyvinvointilomat.fi

The number of children under 18 who are in your care __

Please fill in the application carefully because we cannot process incomplete applications. Write the social security numbers in format ddmmyy-XXXX or ddmmyy-XXXXX. Persons living at the same address are only to fill in one shared application.

1. Application Information Last name						Social security number (in the format ddmmyy-xxxx or ddmmyyAxxx) Telephone number			
Street address				Postal code		Po	stal district		
Email address									
Marriage Cohabitation Widow Divorce				ed Unmarried Living apart					
Single parenthood No	Single	e parent	Co-par	ent					
Professional group									
					ty pensioner Unemployed Student				
Family leave		preneur		hat?					
Necessary aids: If you have a mobility aid (e.g., a walker o	or wheelchair), please in	dicate it here.		Special diets: If you have any kinds of dieceliac disease, please indicate them here.	tary restrict	tions or if you have, for example, diabetes or		
2. Spouse Information									
				Soci	Social security number (in the format ddmmyy-xxx or ddmmyyAxxxx)				
Professional group									
Employee	Retire	ement	Disabili	ty per	nsioner Unemp	oyed	Student		
Family leave	Entre	preneur	Other, v	vhat?					
Necessary aids: If you have a mobility aid (e	e.g., a walker o	r wheelchair), please inc	licate it here.		Special diets: If you have any kinds of dieceliac disease, please indicate them here.	tary restrict	tions or if you have, for example, diabetes or		
Children who are coming along Name	g for the h	oliday Social security n (in the format ddmm)	umber yyAxxxx)		Name		Social security number (in the format ddmmyyAxxxx)		
1.					5.				
2.					6.				
3.					7.				
4.					8.				
3. I am applying for the h	oliday								
By myself With my sp	oouse	With my children	With my s		e With a friend / friends's	family, tl	heir application is under the name		
On a group holiday with an org	ganisation o	called:							
Holiday times and destinations that l	I am applyi	ng for. Please fill i	n 3 different op	tions					
1.									
2.									
3.									
4. Financial information									
Applicant's income	untad :-				Spouse's income				
Net income/month (all taxed income is co The reported income consists of		•			Net income/month (all taxed income The reported income consists o				
	€ □ ot	her, what?		€	earned income	€	other, what?		
	ш.	ild benefit		€	capital income	€ [child benefit€		
	et et	ckness, maternity, c. daily allowance		€	retirement income	€ [sickness, maternity, etc. daily allowance €		
		rer's benefit		€	care allowance	€ [€ [carer's benefit€		
Applicant's debts	no	ousing benefit		t	social assistance Applicant's debts	c	housing benefit€		
Mortgages and student loans			€		Mortgages and student loans		€		
Indicate the total sum of loans here in euros Other loans €					Indicate the total sum of loans here in euros Other loans €				
Indicate the total sum of loans here in euros			€		Indicate the total sum of loans here in euro		€		
Amortization per month Indicate the sum of loan amortizations per month	here in euros				Amortization per month Indicate the sum of loan amortizations per	month here	in euros		

5. Reasons
 Economic reasons (E.g., debts, loans, recovery proceedings) Health reasons (Physical or mental illnesses or handicaps experienced by the family at the moment?) Social reasons (E.g., unemployment, lay off, family issues, loneliness, single parenthood, carer)
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6. Where did you learn about the holiday
From a friend/ relative From the organisation website From social media, where
(Hyvinvointilomat ry) Through social, family or diaconal work From a magazine, where From an organization/ association
Other, where
7. Goals for the holiday What kinds of things do you expect from the supported holiday? Evaluate how important it would be for the following thing to happen during the holiday.
1= not important at all, 2 = not very important, 3 = somewhat important, 4 = important, 5 = very important, x = not goal
Rest and recreation
Physical activity and exercise
Peer support
Social interaction
Family time
Other goal
8. Life situation
Evaluate your current life situation from the following perspectives. This includes the situation of everyone on the same application. 1= very bad, 2 = bad, 3 = neither good nor bad, 4 = good, 5 = excellent
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Physical Health
Mental Health
Social Relationships
Everyday life
The meaningfulness of life The approximate of applications of applications and applications of applications o
The experience of equality
Applicant's signature and date
Your application will be handled with the strictest confidence and the information will be kept in a register maintained by the holiday organisation.
The information will be processed in accordance with the Personal Data Act (523/1999).
Customer selection is based on STM's annual state grant decision and the conditions set out therein. STEA reserves the right to examine the information provided in this application.
I certify that the information I have provided is correct and accept that all information (about mobility aids and the need for help) that is important for
arranging the holiday can be provided for the holiday destination and partner organization.
I confirm that I have the consent of all persons named in the application that their sensitive data can be used for the purpose of granting holiday support in
compliance with data protection legislation. The application contains sensitive information, in particular information about the health and need for assistance of the adults and children applying for and participating in the holiday.
My information can be used anonymously in research.
Applicant's signature
Place and date / Signature

Additional information

Applicants that have been granted a holiday receive an invitation at the latest three weeks before the start of the holiday. We do not notify applicants about negative decisions. The parents are responsible for their children during the holiday. Adults are expected to manage independently with, for example, eating, showering, dressing and medication.