

### Application for a halving of the client fee for the afternoon activity club

**The application shall be delivered to address:** Kuopion kaupunki /Kasvun ja oppimisen palvelualue / Perusopetuksen tukipalvelut/ Iltapäivätoiminta, Suokatu 42, 70100 Kuopio.

<b>Personal data of the child in afternoon activities</b>	Last name and first names:		Personal identity code
	Address, postal code and post office:		
	Place of afternoon activity, school and group:		
	Need for activity hours <input type="checkbox"/> My child participates in the activities for a maximum of 12 days a month. The client fee is €120 per month. <input type="checkbox"/> My child participates in the activities for over 12 days a month The client fee is €160 per month.		
<b>Guardians living in the same household, guardian / spouse or cohabitation partner</b>	Guardian	Guardian, spouse or cohabitation partner	
	Personal identity code	Personal identity code	
	Workplace / place of study starting date	Workplace / place of study starting date	
	Telephone number in daytime	Telephone number in daytime	
	Email address	Email address	
<b>Siblings</b>  Children in day care and/or afternoon activities	<b>Names and day care centre of siblings attending day care, and names and school of siblings attending afternoon activities in basic education</b>		
	Last name and first names, day care centre / school		
<b>The time for which the halving of the client fee is applied for</b>	Starting date: ____ . ____ . ____      End date: ____ . ____ . ____ dd       mm     year    dd       mm     year The decision is made for a maximum period of one school year at a time. No decisions are made retroactively.		

**I confirm that the information is correct and consent to the verification of the information provided.**

Date \_\_\_\_\_ Signatures \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ 20\_\_\_\_ Guardian \_\_\_\_\_ Guardian \_\_\_\_\_

*The application and the decision are confidential*

*(Section 24.1, Subsection 30 of the Act on the Openness of Government activities). The application with its appendices is to be submitted in August or when the child starts afternoon activities to address Kuopion kaupunki, Kasvun ja oppimisen palvelualue, Perusopetuksen tukipalvelut / iltapäivätoiminta, Suokatu 42, 70100 Kuopio or the application can be left in the post boxes outside entrance A. You can submit the application electronically as an attachment to a secure e-mail. Instructions for sending a secure e-mail can be found at [www.kuopio.fi/kuopionkaupunki/asiointi-ja-neuvonta/suojattu-sahkoposti/](http://www.kuopio.fi/kuopionkaupunki/asiointi-ja-neuvonta/suojattu-sahkoposti/)*

*Please find more information about afternoon activities, printable instructions and forms at [www.kuopio.fi/perusopetuksen-iltapaivatoiminta](http://www.kuopio.fi/perusopetuksen-iltapaivatoiminta)*

*Afternoon activities planner and afternoon activities secretary provide more information by phone 044 7181388 (service telephone for afternoon activities) or at [iltapaivatoiminta@kuopio.fi](mailto:iltapaivatoiminta@kuopio.fi) (service e-mail for afternoon activities).*

*Telephone service hours are*

- *Mondays 13.00 to 15.00*
  - *Tuesdays, Wednesdays, Thursdays and Fridays 9.00 to 11.00*
- A personal appointment must be made in advance by telephone or e-mail.*