|  |  |  |
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| **1.****INFORMATION OF CHILD** **CURRENTLY TAKING PART IN** **AFTERNOON ACTIVITIES****(for which the****50% reduction** **or non-collection is sought)** | Last name of child      | Personal ID code      |
| First name(s) of child      |
| Home address     | Postcode and city     |
| School       | School grade      |
| Afternoon activities' service provider      |
| Duration of afternoon activity[ ]  part-time [ ]  full-time |
| Time period for which the reduction/non-collection is sought      |
| **2****OTHER SIBLINGS****(name and year of birth)** | Name of sibling        |
| **3****INFORMATION OF****PARENT(S)/****GUARDIAN(S) OR OTHER ADULT(S) LIVING IN THE SAME HOUSEHOLD**  | Parent’s/guardian’s name      | Telephone (home)      |
| Home address      | Postcode and city      |
| Place of employment/study      | Telephone (place of employment/study)      |
| Name of other guardian/adult living inthe same household      | Telephone (home)      |
| Home address      | Postcode and city      |
| Place of employment/study      | Telephone (place of employment/study)      |
| **4****INCOME INFORMATION**  | Type of income | Income of guardian/parent (mother/adult living in the same household) | Income of other guardian/parent (father/adult living in the same household) |
| Gross | Officeholder's verification | Gross | Officeholder's verification |
| Monthly salary/ Other earned income |       |       |       |       |
| Income from capital: income from interest, income from dividends, income from rents (deducted maintenance charge) |       |       |       |       |
| Pensions |       |       |       |       |
| Unemployment benefits |       |       |       |       |
| Child alimony, child pension |       |       |       |       |
| Entrepreneurs: (please also fill in an entrepreneur´s income statement) |       |       |       |       |
| Maternity allowance, parental allowance, flexible care allowance  |       |       |       |       |
| Other income (eg alternation allowance, self-care support, start-up allowance) |       |       |       |       |
| Other regular personal income(s) |       |       |       |       |
| Deductions:child alimony paid to other family (copy of your payment document) |       |       |       |       |
| **Total income** |  |  |       |       |
| **5** **FURTHER INFORMATION** | I am applying for the reduction or non-collection of afternoon activity fees based on the following grounds      |
| **6****SIGNATURES** | I testify that the information provided is correct, and I authorise all of the necessary verifications of the data from the relevant authorities (all information will be processed confidentially). The parent/guardian is required to report any significant changes in their circumstances e.g. income changes. |
| Parent’s/guardian’s signature and clarification | Date     .     .      |
| Parent’s/guardian’s signature and clarification | Date     .     .      |
| **7****APPENDICES****Always attached with the application** | [ ] Pay slip/certificate, pension[ ] Income from capital[ ] Entrepreneurs: Income declaration form and all mandatory appendices according to company form[ ] Students: proof of studies or participation in vocational training, income receipts[ ] Details of all other regular taxable and non-taxable income(s)[ ] Unemployment benefits [ ] Maternity allowance, parental allowance, flexible care allowance[ ] Child alimony documentsBank statements are not needed. |