

## Application for a place at preschool/after-school recreation centre

To be sent to Barn- och utbildningskontoret, Stadshuset, 571 80 Nässjö

Applicant							
Parent's/Guardian's name					Personal identity number		
Work	Work				Job-seeker/parental leave		
Name of other parent/guardian/husband/wife/partner					Personal identity number		
Work						Job-seeker/parental leave	
Street address			Ma	iling address		Email address	
Married/cohabit	ing	Sin	ngle				
A place is requested as of:			Is a	Is a language other than Swedish spoken in the home? Yes No			
			Sta	te which language:			
The application is for	r the follow	ing child(	(ren)				
Name		Personal	identity number	er Requested pro	eschool/af	ter-school recreation centre/childminder	
Child 1				First choice:			
				Second choice	:		
				Third choice:			
Child 2				First choice:			
				Second choice	:		
				Third choice:			
Child 3				First choice:			
				Second choice	:		
				Third choice:			
Has the child been remunicipality before?	gistered at a	preschoo	l in Nässjö	Yes No	o 🗌		
Other children in the	family						
Name Personal identity number Place at							
Child 1							
Other information about	ut the child	(e.g. allergi	ies, functional	impairments, illnes	ses etc.)		
Place Date Parent's/Guardian's signatu					Signature of other		
Place	Date		rarent's/Gua	aruian's signature		parent/guardian/husband/wife/partner	