

Kauppakaarre 1, 00700 HELSINKI Puh. 0600 418 200 klo 9 - 12 solaris@solaris-lomat.fi www.solaris-lomat.fi

## APPLICATION FOR A SUPPORTED HOLIDAY

Applicants living in different households fill in their own applications. We cannot process incomplete applications. Note that we will only notify the applicant in case of acceptance.

1. APPLICANT INFORMATION Last name		First name				
Social security number: (ddmmyy-xxxx or ddmmyyAxxx)	-	Phone				
Address		E-mail				
Postcode Post office		I want an invitation to my email				
Family relations  Married Cohabited Widowed Divorced Single Living separately under 18 living in same household						
Single parenthood No Single parent Joint custody		nterpreneur Pensioner Disability pensioner Disabled Unemployded Other, please specify				
2. I AM APPLYING FOR A HOLIDAY  By myself With my spouse With my children With my spouse and children  On a group holiday with an organisation called With a friend/a friend's family, their application is by the name  I will go on holiday if my friend cannot go						
3. SPOUSE INFORMATION This information is only filled in if the spouse is also applying to go on the holiday Social security number:  Last name  First name						
Occupational situation  Wage earner Enterpreneur Pensioner Disability pensioner  Parental leave Student Unemployded Other, please specify						
leave Condent Concentration	Specify —					
4. CHILDREN WHO ARE COMING ALON		,				
4. CHILDREN WHO ARE COMING ALON Name	NG FOR THE HOLIDAY	Name	Social security number			
4. CHILDREN WHO ARE COMING ALON Name 1.	IG FOR THE HOLIDAY Social security number	Name 5.	Social security number			
4. CHILDREN WHO ARE COMING ALON Name	Social security number	Name	Social security number			
4. CHILDREN WHO ARE COMING ALON Name 1.	Social security number	Name 5. 6.	Social security number			
4. CHILDREN WHO ARE COMING ALON Name 1. 2. 3.	Social security number	Name 5. 5. 7.	Social security number			
4. CHILDREN WHO ARE COMING ALON Name 1. 2.	Social security number	Name 5. 5. 7.	Social security number			
4. CHILDREN WHO ARE COMING ALON Name 1. 2. 3. 4. 5. HOLIDAY TIMES AND DESTINATION	Social security number	Name 5. 5. 7.	Social security number			
4. CHILDREN WHO ARE COMING ALON Name 1. 2. 3. 4. 5. HOLIDAY TIMES AND DESTINATION 1. 2. 3.	Social security number	Name 5. 6. 7. 8. Please fill in 3 different options				
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7. WHERE DID YOU I Solaris-lomat website Social media			Fri	end/relative		Other, please specify	
8. HOLIDAY OBJECTIVES Evaluate your expectations from following perspectives. This includes the expectations of everyone on the same application. How important would these things be for your holiday?  not little quite quite not holiday objective							
Rest and recreation Sport and other activities Peer support Social interaction Family time Other	important O O O O O O	0 0 0 0	0 0 0 0	0 0 0 0	important O O O O O O O	objective  O O O O O O O O O O Delease specify	
9. LIFE SITUATION	Evaluate your c This includes th very bad	e situation o	uation from f f everyone o neither good nor bad	following pon the same	erspectives. e application. excellent		
Physical health Mental health Social relations Managing everyday life Meaningfulness of life Experience of equality	000000	00000	00000	000000	00000		
1	10. REASONS WHY YOU Fill in all information on your life situation.  NEED A SUPPORTED HOLIDAY WITHOUT JUSTIFICATION, HOLIDAY SUPPORT CANNOT BE GRANTED.						
Economic reasons (getting	into debt, downgr	aded credit rat	ing, ioreciosur	e, nign living	expences etc.)		
Social reasons (unemployment, shift work, immigration, family problems, loneliness, addiction problems etc.)							
Health reasons (physical and mental illness or injuries within the family living in same household)							
Other reasons/additional information							
11. APPLICANT SIGNATURE AND DATE Confirmation that all information given above is correct. Note that your name and address are saved to our customer transaction system.							
By signing, I agree that the information that is necessary for the practical arrangements of supported holiday (e.g. need for assistance, mobility issues) may be given to the holiday resort, and in case of a group holiday, the co-operative organisation. I certify that I have the consent of all persons named in the application to the processing of sensitive information according to data protection legislation and to granting the holiday support. Sensitive information includes, in particular, information on applicants' and their children's health and their need for assistance.							
Date and place			_ Signature	9			