Försäkringskassan

0771-524 524
www.forsakringskassan.se

Application
Supplementary introduction benefit

Personal ID No. A

Personal ID No. B

Send this form to

Försäkringskassans inläsningscentral

839 88 Östersund

Use this form to apply for supplementary introduction benefit for the first time, or to report changes. If you are married or live-in partners, and both of you are entitled to supplementary introduction benefit, you apply together.

To be entitled to supplementary introduction benefit, you must

- participate in an introduction programme
- have or have had custody of the children included in your application. The children must live and be registered at your address, be under the age of 20, and not be self-sufficient.

1. Applicant

First name(s) and last name (applicant A)	Personal ID No. (12 digits)
First name(s) and last name (applicant B)	Personal ID No. (12 digits)

1.a Select payee

Pay the money to	
☐ Applicant A ☐ Applicant B	If you do not select a payee, it will be applicant A.

2. What are you applying for?

☐ I/we apply for supplementary introduction benefit.		
☐ I or we already have supplementary introduction benefit and want to report changes	from (date)	What has changed?

3. Special circumstances for late application

As a rule, you can get introduction for housing at the earliest for the month before applying. If there were special circumstances that impeded your application, you can get money for a longer period.

Explain why you could not apply earlier

71100103

FK 7110 (008 F 002) Fastställd av Försäkringskassan

4. Information about the children you are applying for

When you apply for the first time
Fill in the information about all children included in your application.

When you want to report changes
If you are using this form to include additional children, remember to add both the information about the additional child/children and the child/children you already have introduction benefit for.

First name	Last name	Personal ID No. (12 digits)
First name	Last name	Personal ID No. (12 digits)
First name	Last name	Personal ID No. (12 digits)
First name	Last name	Personal ID No. (12 digits)
First name	Last name	Personal ID No. (12 digits)
First name	Last name	Personal ID No. (12 digits)

4.a Do all the children that you are applying for live with you, at your address?

☐ Yes, all children live with me/us.

☐ No. Please state additional information about where the children live:

71100203

5. Signature

I hereby solemnly swear that the information that I have provided is complete and correct.

I am aware that I may be liable to pay back any incorrectly paid compensation. I know that I may be guilty of a criminal offense if I provide incomplete or incorrect information, or not notify Försäkringskassan when that information changes.

Date (yr, mon, day)	Signature applicant A	Telephone
Date (yr, mon, day)	Signature applicant B	Telephone

Read more about how Försäkringskassan processes personal data at forsakringskassan.se.

Register a bank account
The quickest and most secure way to receive payments from Försäkringskassan is to register a bank account to which you would like the money transferred. The bank account you register must be your own. If you have a Swedish e-identification, you can register a bank account through My pages (Mina sidor) on our website. If you do not have a Swedish e-identification, you can register a bank account via the application form Anmälan om konto (5605).

Report changes
The supplementary introduction benefit is calculated on the information you provide in your application. We will recalculate your benefit if something changes, for example if you end your programme earlier than planned, if a child moves away from home or if a child starts working. When you contact us, please say that you participate in the establishment programme.

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