

Send this form to

Försäkringskassans inläsningscentral

839 88 Östersund

Who can get activity compensation?

You can get activity compensation as of July in the year you turn 19 if you will not be able to work full-time for at least one year because of illness, an injury or a functional impairment. You can receive activity compensation for a maximum of three years at a time and at the longest up to the end of the month you turn 30 years of age.

You can apply at forsakringskassan.se if you have a mobile Bank ID or an electronic ID.

1. Applicant

Name and surname		Personal ID no. (12 digits)
Postal address	Postal code and city	

2. What is the reason for your application?

I am applying for	
<input type="checkbox"/> 1/4	<input type="checkbox"/> 1/2
<input type="checkbox"/> 3/4	<input type="checkbox"/> full
activity compensation	
As of year, month	Up to and including year, month
We need a medical certificate describing your illness, injury or functional impairment and how it affects your possibility of working. You must send that to us if Försäkringskassan does not already have it	
<input type="checkbox"/> I enclose a medical certificate	
<input type="checkbox"/> The doctor's certificate has already been submitted to Försäkringskassan	
<input type="checkbox"/> I have requested a doctor's certificate from _____ and will submit it later on _____ (name of physician)	

3. Account details

Register account for disbursements

If you have not already notified us of an account for your disbursements from Försäkringskassan, you can do so using My Pages [Mina sidor] or by filling out the form *Anmälan om konto* (5605). You must register an account that belongs to you. If you would like your disbursements to be made into someone else's account instead, you must fill out the form *Fullmakt - Utbetalning till en annan person* (5606).

4. Have you lived or worked in any other country apart from Sweden?

<input type="checkbox"/> No	Sweden has agreements with other countries which means the compensation can sometimes be higher if you have lived or worked in another country. In that case, we need to know during which periods you lived or worked abroad and in which countries. You can provide this information on this form under "Other information" or in an attachment. Otherwise, your case officer will ask you about this later.
<input type="checkbox"/> Yes, I have lived in another country	
<input type="checkbox"/> Yes, I have worked in another country	

5. State here if you want someone else to handle your contacts with Försäkringskassan

Here you can state if you want to authorise someone else to handle your contacts with Försäkringskassan. In that case, we will talk to that person in the first instance but we may also need to talk to you. That person has the right to represent you and read any decisions and other letters that Försäkringskassan sends to you.

I authorise the following person to handle all contacts with Försäkringskassan concerning my application for activity compensation on my behalf. I can revoke the authorisation at any time.

This authorisation applies until I receive the final decision about my right to activity compensation.

If I am granted activity compensation, the authorisation will also apply during the period that I receive the compensation.

Name and surname	Personal ID no. (12 digits)	Telephone, including area code
Postal address	Postal code and city	

6. Other information

Here, you can state if you have lived or worked abroad. You can also provide other information that you could not fit in anywhere else on the form.

7. Signature

I solemnly declare that the information provided in this form is correct and complete. Should this information change, I am obliged to inform Försäkringskassan. I am aware that it is a punishable offense to provide false information, omit information or to not notify Försäkringskassan if any of the information I have provided should change.

Date	Signature	Telephone
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8. Complete this section if you are signing on behalf of the applicant as a trustee or administrator

Please enclose with this document a register extract showing that you have been appointed as a trustee or administrator.

I have been appointed as a <input type="checkbox"/> trustee <input type="checkbox"/> administrator	Name in BLOCK letters
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Read more about how Försäkringskassan processes personal data at forsakringskassan.se.

Useful information when applying for activity compensation

You can apply via our website

You can apply for activity compensation at Försäkringskassan's website, forsakringskassan.se, if you have a Bank ID, a mobile Bank ID or electronic ID. Log in at *Mina sidor* (My pages), choose *Alla e-tjänster* (E-services) and open *Ansökan om aktivitetsersättning* (Application for activity compensation). When you apply via our website, you will receive confirmation straight away that we have received your application. It is easier than filling in a form and sending it in by post.

What happens after you have sent in your application?

You will receive a confirmation once we have received your application. We might need to contact you in order to assess your work capacity. We might also need to contact healthcare, Arbetsförmedlingen (the Swedish Public Employment Service) or your municipality. Even if you have authorised someone else to handle your case, your case officer may still need to meet you but in that case, you and your representative can come together to the meeting.

You may be entitled to housing supplement (*bostadstillägg*)

If you are receiving activity compensation and live in Sweden, you may also be entitled to housing supplement. In order to claim housing supplement from the same date as the start of your activity compensation, you must submit your application within one month from when you receive a decision in the matter of activity compensation. For more information and to apply, visit www.forsakringskassan.se.

Read more at forsakringskassan.se

You can read more about activity compensation at forsakringskassan.se.