Pdf Info Reset

Earnings-related allowance application

☐ First application ☐ Follow-up application

Deliver the application to your unemployment fund within three months of the allowance's starting date.
Please remember to register as an unemployed jobseeker at a TE Office.

1. APPLICANT'S DETAILS

Personal identity code	First name	Last name

Address	Post code and post office

Telephone number	Email address

Bank account in IBAN format

F I

Enter here date of birth of children under the age of 18 in your care (in dd.mm.yy form). Please also enter details of any children under the age of 18 from your spouse's previous relationships if they are living in the same household.

Name of unemployment fund	Member union

Name of previous fund (if you have been a member of other unemployment fund)

2. REPORT OF PERIOD PRECEDING UNEMPLOYMENT (COMPLETED BY EMPLOYEES)

Employer's name

☐ Employment has been terminated ☐ Employment continues

The payment of an earnings-related allowance requires that you have been employed for at least **26 calendar weeks** in the past 28 months.
The minimum working hours are 18 per calendar week, and you must have been paid a salary that is compliant with the collective agreement.

- Enclose the pay certificate for at least the 26 weeks of employment requirement with your application.
- Enclose copies of your employment contract and employment certificate with your application.
- If you have been dismissed, enclose a copy of the notice of dismissal with your application.
- If you have been laid off, enclose a copy of the lay-off notice with your application.

I have been away from work for the period	Reason

The review period for employment condition (the 28 months preceding unemployment) can be extended for reasons such as illness, military service, full-time studies or the care of a child under the age of three.

- Enclose a reliable report for this period (e.g. Kela decision or study certificate) with your application.

I have been receiving a part-time pension, partial disability pension, on partial care leave or job alternation leave before the beginning of my unemployment

☐ Yes. Which of the above? _____ ☐ No

- Enclose a pay certificate for the period preceding your part-time pension, partial child care leave or job alternation leave with your application.
- Enclose copies of your pension decision and possible discontinuation decision, or of your partial child care leave agreement with your application.

I have received or will receive a benefit or special compensation related to the termination of my employment

☐ Yes. Type of compensation _____ ☐ No

- Enclose a copy of the document indicating the amount of and grounds for the compensation with your application.

I have applied for or been granted wage security

☐ Yes ☐ No

You are eligible for wage security if you have unpaid wages due to your employer's insolvency. The application must be delivered to a TE Office or Centre for Economic Development, Transport and the Environment.

- Enclose copies of your wage security application and decision with your application.

I have contested my dismissal or lay-off

☐ Yes ☐ No

If you consider your laying off or dismissal to be unlawful, you can make demands in this regard to your employer, either yourself or with help from a trade union representative.

I have participated in a working hour bank system

☐ Yes ☐ No

- Enclose the working hour bank agreement with your application.

3. REPORT OF PERIOD PRECEDING UNEMPLOYMENT (COMPLETED BY ENTREPRENEURS)

I have been working full-time as an entrepreneur for

☐ Less than 15 months ☐ 15–18 months ☐ More than 18 months

The payment of an earnings-related allowance requires that you have been working as an entrepreneur as member of entrepreneurs unemployment fund for at least 15 months in the past 48 months. If you have been working as an entrepreneur for less than 18 months and do not fulfil the requirements for the earnings-related allowance for the entrepreneur, complete Section 2.

- Enclose a certificate of the earned income confirmed in your statutory pension insurance and proof of payment of pension insurance premiums with your application. Request the certificate from your pension insurance company.
- Enclose a capital gains calculation and its appendices if you have been working as an entrepreneur for more than 18 months.

I have been away from work for the period	Reason

The review period for employment condition (the 48 months preceding unemployment) can be extended for reasons such as illness, military service, full-time studies or the care of a child under the age of three.

- Enclose a reliable report for this period with your application.

I have been on a part-time pension or partial disability pension before the beginning of my unemployment

☐ Yes. Which of the above? _____ ☐ No

- Enclose a certificate of earned income confirmed in your statutory pension insurance and proof of payment of pension insurance premiums for the period preceding your retirement with your application.
- Enclose a copy of your pension decision with your application.

4. OTHER ENTREPRENEURIAL ACTIVITY (COMPLETED BY EMPLOYEES AND ENTREPRENEURS)

During the past 28 months, in addition to being in paid employment or working full-time as an entrepreneur I am/have been

☐ CEO and/or a board member in a company of which I own a minimum of 15 % (or 30 % together with my family)

☐ employed by a company, of which me and/or my family members own at least 50% in total

☐ an independent entrepreneur or self-employed (Tmi, Ky, Ay, etc.)

☐ a member of a co-operative of no more than six members

☐ owner of a farm or practised agriculture

☐ owner of a forest estate or practised forestry

Notify the TE Office of your entrepreneurial activities.

- Enclose proof with your application, e.g. the most recent confirmed personal taxation decision with its specification section and a shareholders' register

☐ I am not or have not been engaged in part-time entrepreneurial activity

5. REPORT OF INCOME AND BENEFITS RECEIVED DURING UNEMPLOYMENT

I receive income from work, or work as an entrepreneur, during my unemployment

☐ Yes. Payer _____ ☐ No

Please also enter details of any income such as attendance allowances, copyright fees and income from own employment.

- Enclose a copy of your employment contract and proof of received wages or fees with your application.

I receive or have applied for another benefit during my period of unemployment

☐ Yes. Which? _____ ☐ No

You do not need to report child benefits, survivor's pension, housing allowance or income support.

- Enclose a copy of your pension or benefit decision with your application.

☐ My pension decision has been rejected or I have appealed against the decision	Name of benefit

I receive or have applied for home care allowance	My spouse receives or has applied for home care allowance
☐ Yes ☐ No	☐ Yes ☐ No

Who takes care of the child?

Answer the question below if your spouse receives home care allowance.

My spouse is employed, is studying or is working as an entrepreneur during the period for which he/she receives home care allowance.

☐ Yes. Describe the activity below ☐ No

6. ACCOUNT OF THE PERIOD FOR WHICH YOU ARE APPLYING FOR EARNINGS-RELATED ALLOWANCE

Date	Account	Working hrs H	Working hrs Min
Mon ___.___.			
Tue ___.___.			
Wed ___.___.			
Thu ___.___.			
Fri ___.___.			
Sat ___.___.			
Sun ___.___.			

Date	Account	Working hrs H	Working hrs Min
Mon ___.___.			
Tue ___.___.			
Wed ___.___.			
Thu ___.___.			
Fri ___.___.			
Sat ___.___.			
Sun ___.___.			

Date	Account	Working hrs H	Working hrs Min
Mon ___.___.			
Tue ___.___.			
Wed ___.___.			
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Fri ___.___.			
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Sun ___.___.			

Date	Account	Working hrs H	Working hrs Min
Mon ___.___.			
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Thu ___.___.			
Fri ___.___.			
Sat ___.___.			
Sun ___.___.			

Date	Account	Working hrs H	Working hrs Min
Mon ___.___.			
Tue ___.___.			
Wed ___.___.			
Thu ___.___.			
Fri ___.___.			
Sat ___.___.			
Sun ___.___.			

EXAMPLE

Date	Account	Working hrs H	Working hrs Min
Mon 2 . 3 .	Unemployed		
Tue 3 . 3 .	Sick		
Wed 4 . 3 .	Working	5	45
Thu 5 . 3 .	In TE service		
Fri 6 . 3 .	Unemployed		
Sat 7 . 3 .	Working	10	
Sun 8 . 3 .	Unemployed		

☐ My period of unemployment is ending since I will be employed full-time for more than two weeks. Starting date _____.

☐ My period of unemployment is ending for another reason. Starting date _____.
Reason for ending

- **Next to each day (Saturdays and Sundays included), please enter** whether you have been unemployed, working, working as an entrepreneur, taking part in an employment promotion measure, or been ill.
- Enter your working hours in the columns for each day of employment (working hours as an entrepreneur do not have to be entered).
- Enter paid sick leave or holiday hours.
- If you are in military service, participating in military refresher training, serving a sentence of imprisonment, or being treated in a hospital or other institution, please indicate this.
- If you are absent from an employment promotion measure, indicate this. Also indicate the reason for your absence if due to a job interview, holding a public position of trust, your own illness or that of a child in your care under the age of 10.

- Enclose a doctor's or nurse's certificate if absence from a TE service due to your own illness lasts for more than three consecutive days of participation.
- Enclose a rental agreement or other reliable proof of accommodation-related costs with your application if you are participating in an employment promotion measure outside your municipality of residence and you are entitled to an increased expense allowance.

7. ADDITIONAL INFORMATION

8. DATE AND SIGNATURE

Please note that you can sign and post your application following the last day of the application period at the earliest.

I attest to the correctness of the information submitted and will report any changes to the information.

Date	Signature

OBLIGATION TO PROVIDE INFORMATION

Unemployment Security Act, 2 § of Chapter 11

The applicant of an unemployment allowance must provide the unemployment fund with the information required for the granting and payment of the allowance. If the circumstances of the recipient of the allowance change in a manner that could affect his or her right to receive the allowance or reduce the amount of the allowance, he or she must report such changes to the payer of the unemployment allowance without delay. If required, the unemployment fund may request other information than that specified on this form.

RECEIPT AND DISCLOSURE OF INFORMATION

Unemployment Security Act, Chapter 13

Any secrecy provisions or other limitations on the availability of information notwithstanding, the unemployment fund is entitled to receive the information required to decide the matter being processed or to perform any other duties decreed for it, free of charge,

- from central government and municipal authorities and other public corporations;
- the Finnish Centre for Pensions, pension and insurance companies, and pension funds;
- from employers, clients or other commissioners of work, unemployment funds, employer's funds and training service providers or other educational institutes referred to in the Act on Public Employment and Business Service; and
- from the other organisers of employment promotion measures.

For the purpose of carrying out their duties, the unemployment fund is entitled to receive, free of charge,

- from the TE Office a binding labour policy statement on the labour policy requirements for receiving the allowance; and
- information on the beginning and end of any sentence from the Criminal Sanctions Agency; the Agency is required to disclose this information immediately when the person is admitted into the institution.

Any secrecy provisions or other limitations to the availability of information notwithstanding, the unemployment fund is entitled to disclose to the Employment and Economic Development Office any information, obtained in the course of carrying out its duties, on matters affecting the labour policy requirements for receiving an unemployment allowance. Any secrecy provisions notwithstanding, the above-mentioned information can be further disclosed to the appropriate authorities for the investigation of any violations and crimes and for the pressing of charges.

Any secrecy provisions and other limitations to the availability of information notwithstanding and in addition to the rights provided for in the Act on the Openness of Government Activities, the unemployment fund is also entitled to disclose personal identity codes and other identifying information, information on paid allowances and compensations, and other equivalent information required for connecting personal data and other one-off surveillance measures necessary for the investigation of crimes and misuse involving social security benefits to ministries, the Tax Administration, and institutions or corporations managing the statutory social security system, if the benefit referred to in the Unemployment Security Act has an impact on the social security benefit for which the corporation is responsible, as well as to the police and prosecuting authority any information required to investigate and prosecute crimes. However, health information or other information describing the grounds for social assistance may not be disclosed.

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