



GRINDAVÍKURBÆR

UMSÓKN UM ÞJÓNUSTU VIÐ FÖTLUÐ
BÖRN OG UNGMENNI/
APPLICATION FOR SERVICES FOR
DISABLED CHILDREN AND YOUNG
PEOPLE

EBL 1/2011

Útgáfa 1.0

Dags. útg. 10.2017

Málsnr.:

Date:

Information about an applicant:

Name of a child :

Kennitala:

Address:

Post code and
town:

Information about guardians :

Name:

Kennitala:

Address:

Post code and town:

E-mail :

Phone number:

Name:

Kennitala:

Address:

Postcode and town:

E-mail:

Phone number:

Applying for following services:

Almenn liðveisla/
General assistance

Skammtímvistun (Heiðarholt)/ Short
term accomodation

Stuðningsfjölskylda
/ Support families

Ferðapjónusta /Transportation service
(Skólaakstur/Heiðarholt)

Anything else that applicant wants to convey:

Signature of an applicant/ guardian :

Place and date:

Signature :