



GRINDAVÍKURBÆR

Málsnr.: _____

Date : _____

Application for home services/ day stay

EBL 1/2011

Útgáfa 1.0

Dags. útg. 10.10.2017

Information about applicant:

Name:

Kennitala:

Address:

Phone number:

Stay outside home (workplace, school, institutions):

I live alone

Phone number :

I live with others. If yes, who?:

**E-mail
Kennitala :**

Partner/ closest family:

Phone number:

Address:

Why is the service needed:

It is applied for following services

Help with cleaning and housework

Day care

Personal care assistance

Evenings and weekend service

Assistance with supplies

When processing following application, the social services of Grindavik can request following documents:

Certificates from doctor, home nurse, physiotherapist, social worker and/or other professionals.

Payment slip from Tryggingastofnun, pension funds and tax report. .

Applicant's signature:

Place and date:

Signature:

By signing, an applicant allows the employee to seek more information from professionals if needed .