

Confidential under section 24(25) of the Act on the Openness of Government Activities

Request for information on social welfare client data

Client name (including previous names) and phone number	Personal identity code
<p>I am requesting information (please indicate the correct option)</p> <p><input type="checkbox"/> Regarding myself</p> <p><input type="checkbox"/> Regarding my dependant*</p> <p><input type="checkbox"/> Regarding my client/the person under my guardianship**</p> <p><input type="checkbox"/> On the basis of being the party*** to the matter</p> <p>* Add the child's consent for a child aged over 15 as an attachment to the request</p> <p>** Attach a document proving guardianship to the request</p> <p>* The party is the person whose right, interest or obligation is concerned (* Section 11 of the Act on the Openness of Government Activities 621/1999)</p>	
Name and telephone number of the child's guardian / legal guardian/ party:	
Grounds when requesting information on the basis of being a party to the matter	

<p>The social welfare service task to which the request for information applies</p> <p><input type="checkbox"/> Services for older people</p> <p><input type="checkbox"/> Services for families with children (e.g. parenting and family counselling, home services for families with children, pupil welfare)</p> <p><input type="checkbox"/> Child welfare services</p> <p><input type="checkbox"/> Family law services (e.g. safeguarding the custody, right of access and maintenance for the child)</p> <p><input type="checkbox"/> Substance abuse services</p> <p><input type="checkbox"/> Services for people of working age (e.g. social assistance, rehabilitative work activities)</p> <p><input type="checkbox"/> Services for people with disabilities</p>

Information requested (indicate the documents and the period of time that the request concerns (e.g. social assistance applications and decisions 2013-2015))	
The social welfare office or the service unit for whose client the data has been formed (if necessary, list all different municipalities, including those that no longer exist)	
Data delivery address	
Date, signature and name in block letters*	
*A form delivered by post must be dated and signed by hand. If the signature is missing, the requested copies cannot be delivered.	
Form delivery address Archives and Information Services North Karelia wellbeing services county - Siun sote Tikkamäentie 16 80210 Joensuu	Received (recipient fills in)

The client has the right to access documents concerning themselves (section 12 of the Act on the Openness of Government Activities 621/1999). Social welfare documents containing information on a social welfare client or another private person are confidential (section 14 of the Act on the Status and Rights of Social Welfare Clients). The recipient is responsible for the proper handling and disposal of the provided documents.

A fee may be charged for a request made by the data subject in accordance with section 34 of the Act on the Openness of Government Activities. A fee is charged according to the valid product price list.