

Application form for SIK's Social Fund

To be filled in and sent to the fund:

Fax 32 49 39 or

E-mail socialfonden@sik.gl

If you are in doubt when filling out the form, you can contact SIK, phone 32 21 33

Name _____

Cpr. no. _____ Cell phone _____

E-mail _____

Applying for:

Accompaniment in case of serious illness

- Airline tickets.
- Accomodation/hotel.
- Lost earnings.
- Travel card, Denmark.

Application as a relative of the patient:

- As parents.
- As a spouse/cohabitant.
- As siblings.

Child/children under the age of 18 to be included on the accompanying journey.

Documentation (must always be attached):

- Medical certificate regarding the patient.
- Applicant's 3 last payslips.
- Applicant's tax / B card (in case of lost earnings).
- Employer's refusal of support, and the reasons for the refusal.
- As documentation of the family relationship: Baptism or residence certificate.

Home transport of the deceased

- Home transport of coffin.
- Home transport of urns.

Documentation (must always be attached):

- Applicant's 3 last payslips.
- Invoice from the undertaker (in Denmark).

Acquisition or renewal of glasses

- Acquisition of glasses.
- Renewal of glasses.

Applied for:

- The applicant herself.
- The applicant's child under 18 years of age.

Documentation (must always be attached):

- Statement from optician.
- Applicant's 3 last payslips.
- Certificate of residence.

By signing you confirm that you give consent to the processing of your personal information and that you have obtained consent from your relatives to pass on personal information about this.

Your personal information will be processed by both SIK and your employer.

Date

Signature

Further information and conditions can be obtained by contacting SIK