

Application for childbirth subsidy – students



Each of the parents needs to complete his or her own form

Documentation may be returned to the e-mail address: faedingarorlof@vmst.is, and by post to Fæðingarorlofssjóður Strandgötu 1, 530 Hvammstanga - or to the nearest Vinnumálastofnun Service Centre.

1. Name		National ID number	
2. Address		Postal code	Municipality
3. Home phone / Mobile phone / Work phone		E-mail address	
4. I wish to receive: <input type="checkbox"/> letters/messages from Fæðingarorlofssjóður by e-mail , sbr. cf. section 3. <input type="checkbox"/> letters/messages from Fæðingarorlofssjóður by regular post .			
5. Name of the other parent		National ID number of other parent	

Birth, adoption and long-term fostering

<p>6. a) Each parent has a 3 month independent entitlement (90 days). I intend to use this entitlement for a period of _____ days.</p> <p>b) The joint entitlement of parents is 3 months (90 days). Of this period of joint entitlement I intend to use _____ days.</p> <p>c) One parent the entitlement of a parent is 9 months (270 days). I intend to use this entitlement for _____ days. This applies to in such instances when one of the parents passes away during the pregnancy and the child is born alive, a single mother undergoes artificial insemination or a single parent adopts a child or takes a child for long-term fostering.</p> <p>d) Multiples. Number of children: _____. For each additional child born alive or stillborn after a 22 week pregnancy, or who is placed for adoption or placed in long-term fostering a period of 3 months will be added (90 days). I intend to use _____ days.</p>
--

Stillbirth or miscarriage

<p>7. a) Directly following a miscarriage after 18 weeks of pregnancy a 2 months (60 days) period of joint entitlement is created. I intend to use _____ days.</p> <p>b) Directly following a stillbirth after 22 weeks of pregnancy a 3 months (90 days) period of entitlement is created for each parent independently. I intend to use _____ days.</p>

8. A parent who is entitled to a parent's allowance can at the earliest commence receiving the allowance in the month of birth of the child and the parent's allowance will be paid as of the 1st day of each month. A parent's allowance can not be divided up into further periods. The right to a parent's allowance is cancelled when the child reaches the age of 24 months.

I wish to begin receiving the parent's allowance the 1st day of _____ (month) in _____. Disbursement takes place afterwards at the end of each month.

I wish that payments be deposited into my **bank account**: Bank no. _____ Hb. _____ Account no. _____

Tax free income allowance. In order to use the tax free income allowance with the Fæðingarorlofssjóður the application form „application to use the tax free income allowance“ must be submitted to the Fæðingarorlofssjóður on the 20th day of the month in which it is to be applied at the latest.

9. The following documentation must be submitted to the Fæðingarorlofssjóður:

- Confirmation from the school or educational institution that a parent has been registered for full educational credits and fulfilled the requirements for sufficient progress of studies at that time.
- Certificate of expected date of delivery of the child if applicable (obtained from midwife).
- Notification concerning the schedule for the maternity/paternity leave if applicable (application form can be downloaded from the Fæðingarorlofssjóður website).

10. If both of the parents apply for payments but are not married or in a registered cohabitation then either of the following must be submitted:

- a) Agreement on joint custody attested by the district commissioner, or
- b) The signature of the custodial parent including a birth certificate of the child issued by Registers Iceland who attests to the paternity of the child.

The undersigned parent who has the custody of the child/children (mutipleths) agrees hereby that a non-custodial parent has visitation rights with the child/children during his or her maternity/paternity leave.

Signature of the custodial parent

11. Other information that the **applicant** wishes to include:

12. By my signature I agree that Vinnumálastofnun – the Icelandic Directorate of Labour may gather any necessary information from the Commissioner of the Inland Revenue in the execution of the act.

Place and date:

Applicant's signature:

The Fæðingarorlofssjóður wants to welcome parents to study the following information which may be found on the Fund's website. www.faedingarorlof.is

- What are the entitlements of parents with respect to maternity/paternity leave/parental allowance
- Which documentation must be submitted with the application
- The application process
- Management of payments during the maternity/paternity leave
- Miscellaneous information about the rights related to maternity/paternity leave/parental allowance

If you have any questions then please contact the staff at Fæðingarorlofssjóður in telephone no. 515-4800, or send an inquiry to the email address: faedingarorlof@vmst.is and we will gladly assist you.