

Application for day-care place

*Mandatory

Personal information

Step 1 of 5

Fill inn personal identity number – 11 digits, for the child, the applicant and the co-applicant (spouse/cohabiter).
NB! When finished registering the application press “Confirm”. You will then receive a confirmation that the application is received provided that you have stated your e-mail address in the application.

Child:*

Parents/Applicant:*

Co-applicant (Must be stated if you are married or cohabiter):

Information about the day-care centres and the intake is in the home pages to Ås municipality.

The information you file in the application will be stored in a database system in Ås municipality.

The information is necessary to administrate and assign day-care places.

The information will be available for the intake authority.

Incorrect information may result in termination of the day-care place.

In compliance with “the law about personal information” each and everyone may ask for a printout of all data stored. A written application about that has to be put forward to:

Ås Kommune
Oppvekst- og kultur
Postboks 195
1431 Ås

Continue

Cancel

Application for day-care place

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Personal information

Step 2 of 5

Child:

Parents/Applicant:

Contact information

To simplify our need for contacting you as applicants we need information on how/where to reach you. We therefore recommend you to register at least 1 phone number. By registering your email address a copy of the application will be sent to that address.

Parents/Applicant

Private Phone:

Applicant's mobile phone:

Applicant's job / school / home worker / in search of work:*

Applicant's work phone:

Applicant's email:

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Personal information

Step 3 of 5

Child:

Parents/Applicant:

General information

Native tongue:*

Wanted place from date:*

 (DD.MM.YYYY)

Do you want offer(s) from other day-care centres if the wanted alternative is not granted?

If the child has place in a day-care centre, state here which

Name (first- and family name) and name of the kindergarten for brothers or sisters having a day-care place

Name (first- and family name) and personal identity number – 11 digits for brothers or sisters applying for a day-care place (an application for each child must be filed)

Other information significant for the application

Other information:

Continue

Cancel

Application for day-care place

OBS! Registration of alternatives and button for confirmation is on the bottom of this page.
You can also use the scroll down field to the right to move down the screen.

Personal information

Step 4 of 5

Child:

Parents/Applicant:

Contact information

Parents/Applicant:

Private Phone:

Mobile phone:

Place of work:

Work phone:

E-mail address:

General application information

[Change of general application information](#)

Date of application:

Native tongue:

Wanted place from date:

Other information:

If you are applying with preferences documentation has to be sent by post to

Ås kommune, Oppvekst- og kultur,

Postboks 195, 1431 Ås.

See the regulations.

Cross of if attachments:

Do you want offer(s) from other day-care centres if the wanted alternative is not granted?

If the child has place in a day-care centre, state here which:

Name (first- and family name) and name of the kindergarten for brothers or sisters having a day-care place:

Name (first- and family name) and personal identity number – 11 digits for brothers or sisters applying for a day-care place (an application for each child must be filed)

Want a place:

Chose alternative:

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Chose alternative 1

Step 5 of 5

Part of the municipality:*

Type of operation:*

Kindergarten:*

Type of place:*

Wanted place from date:*

 (DD.MM.YYYY)

State here wanted weekdays and perhaps what other type of place in this kindergarten:

General application information

Date of application:

Native tongue:

Wanted place from date:

Other information:

If you are applying with preferences documentation has to be sent by post to

Ås kommune, Oppvekst- og kultur,

Postboks 195, 1431 Ås.

See the regulations.

Cross of if attachments:

Do you want offer(s) from other day-care centres if the wanted alternative is not granted?

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Name (first- and family name) and personal identity number – 11 digits for brothers or sisters applying for a day-care place (an application for each child must be filed)

Want a place

Alt. 1 Wanted place from date:

Type of place:

Part of the municipality:

Type of operation:

Kindergarten:

Notes:

Your application is registered

You will receive a confirmation sent to your e-mail showing that we have received your application.

It is possible to print out your application or register additional children.

[Print out the application](#)

Register additional child

Finish