

## Recipient

Stadtgemeinde Schwechat  
STAD - Gesundheit und Soziales  
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2320 Schwechat  
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**SCHWECHAT**

Mandatory fields are marked with \*.

# Application for Free Meals in Childcare

Free Lunch including Snack

## Child's Information

Last name *	First name *
Date of birth *	Sical Security number *
School *	

## Parents' / Guardians' Information

Last name *	First name *
Address *	
Phone*	E-Mail*

## Number of all persons living in the family unit (including the child)

Number of Adults *	Number of Children *	Birth Years of Children *
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## Monthly Household Income of all Family Members

(All income from self-employment and employment, maintenance payments, special emergency, parental leave, and childcare allowance, pensions, etc.)

## Please attach copies of the above-mentioned documents to this application!

Total Monthly Household Income *
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## Data Protection Information:

For the purpose of processing your application, we need to process your personal data to the extent of this form. Your data will be treated confidentially. Disclosure will only be made to the minimum extent necessary for processing your application. Detailed information about data protection can be found at [www.schwechat.gv.at/en/privacy](http://www.schwechat.gv.at/en/privacy)

**As the legal guardian, I hereby declare that the information provided in the application is correct and I will promptly repay any reduction in the cost contribution granted due to incorrect information. Any changes (extent of care, family income, residence, family situation) must be promptly reported to the City of Schwechat.**

Date, Place	Applicant's Signature