**Statement**

the Gyt. 21/. Free nursery care according to § (1) point a) and for the use of preschool children's meals

1.,The undersigned …………………………… (name at birth: ………………………. place of birth, ………………………date …………………mother’s name : …………………… ) ………………………………………………

# 1.1. child’ name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (place of birth, date \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_.\_\_.\_\_.

mother's name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_),\*

# 1.2. child’ name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (place of birth, date \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_.\_\_.\_\_.

mother's name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_),\*

XXXI of 1997 on the protection of children and the administration of guardianship of their parent/other legal representative/guardian (the appropriate one must be underlined). I am requesting the use of the statutory discount for child meals on the basis of the title below, since the child(ren):\*\*

a) receives a regular child protection discount from …… year ………..… month ……,

b) is permanently ill or disabled,

c) a permanently ill or disabled child is being raised in the family,

d) three or more children are raised in the family,\*\*\*

e) the guardianship authority, ordered their admission to education

f) the monthly income per person in her family does not exceed 130% of the net amount of the mandatory minimum wage reduced by personal income tax, employee health insurance and pension contributions.

 (2023-ban) 232.000 Ft nettója: 154280,- Ft x 1,3-al = **200.565-** **Ft/ hó**

Provision of meals

a) exclusively for the midday hot main meal □ b) ten o'clock and the midday hot main meal □

c) midday hot main meal and snack □ d) three meals □

e) please provide a special meal yes / no (underline the selected option!) with regards to the following health condition

2. Aware of my criminal liability, I declare that the information provided corresponds to reality, and at the same time I consent to the use of the information in the application for the use of the normative discount for child meals.

Date: Budapest, 202…………. ………................................................ ...............

 the signature of the care recipient (parent, other legal representative, in the case of a child in foster care, the foster parent providing care, institution manager)

\*The point can only be charged if the parent/other legal representative/guardian claims the normative discount for several children attending the same institution under the same title. If the legal title is different, a separate declaration must be completed for each child. According to the number of children, the rows can be expanded.

\*\* The appropriate point must be marked! Point f) can only be marked if the child receiving care does not meet any of the conditions according to points a) to e).

\*\*\* The range of children to be taken into account when determining the number of children: A child under the age of 18 who lives together in the same apartment and has a registered place of residence or residence there. A child under the age of 25 attending full-time education in a public educational institution or a full-time student in a higher education institution and a child who is chronically ill or severely disabled regardless of age, with the exception of a child temporarily placed with a foster parent, a child placed in foster care and a young person receiving after-care care adult.