



THE UNEMPLOYMENT FUND FOR HIGHLY EDUCATED

CERTIFICATE FOR APPLYING EARNINGS-RELATED ALLOWANCE

Must be filled by employer

Information is needed for comparison, e.g. a substitutes working hours are compared to a full-time's working hours while settling a person's right to earnings-related allowance.

Employees name _____ (_____ - _____)

Employer _____

Name of the educational institution _____

Duration of work ____ . ____ . ____ - ____ . ____ . ____

Title _____

part-time ___ / full-time ___

Taught subject _____

Employee's working hours according to the contract of employment _____ h/week

Teaching the subject in question's full-time teacher's lowest weekly working hours in the subject taught by applicant:

full-time _____ h/wk
and compulsory teaching time _____ h/wk

Inform in the footnotes if there is no compulsory teaching time.

Footnotes: _____

Date _____ Contact person _____ Phone _____

Print name: _____

E-mail: _____ @ _____