

Employer's application for rehabilitation benefits



Salary information must be sent with this form as secure email at the address <https://turvaposti.varma.fi>. Enter skannaus@varma.fi as the recipient and enter the employee's name and personal identity code in the Subject field. Alternatively, you can send the form by post to the following address: Varma Mutual Pension Insurance Company, Rehabilitation Services, P.O. Box 3, FI-00098 VARMA, Finland.

We pay the employer a rehabilitation allowance that is equivalent to the salary.

If the salary paid by the employer is less than the rehabilitation allowance, the difference is paid to the rehabilitant.

Employee	Name	Personal identity code
Employer	Employer's name	
	Contact person's name	Telephone number
	Address of the contact person	Email address
Rehabilitation programme	Start and end date of the rehabilitation programme	
Salary	Salary paid for the duration of the rehabilitation programme (gross salary, excluding social security contributions)	
	Fixed salary	€/month
	Salary for less than a month (if the rehabilitation programme starts/ends mid-month)	
	Time period 1	- euros
	Time period 2	- euros
	Salary varies depending on the month	
The amount of salary during the period	- euro	
The employer must provide Varma with information on the amount of salary per month if the salary paid by the employer varies. The salary information must be submitted to Varma immediately after the amount of the salary payment is known so that we can pay the rehabilitation allowance to the rehabilitant and employer.		
Bank details	Employer's bank details	
Date and place		
Signature	Signature of the employer and name in block letters	

The employer is responsible for notifying Varma immediately of any changes to the amount of salary during the rehabilitation programme. Information on any changes to salary must be provided by the 20th day of the previous month. Varma has the right to recover any excess rehabilitation benefits paid by it.