

Apply for a formal opinion regarding student finance for transition and retraining to submit to CSN

If you are self-employed or not covered by a collective agreement, you can obtain a statement of opinion from the public transition organisation for your application for student finance for transition and retraining from CSN. You can only get a statement of opinion for courses in Sweden that are eligible for student grants and loans from CSN.

Read about how we handle personal data and what rights you have nysteget.se/in-english/about-us/our-personal-data-processing

*= Mandatory information

Your details

Check this box if you have protected personal data.

Personal data

Personal identity or coordination number *
Given name(s) *
Surname *

Address information

Address *
Postal code *
Town/City *
Country

Contact details

Email address (we will send the confirmation email and decision to this email address)
Telephone number *

Collective agreement and transition organisation

It is your employer's collective agreement that determines which transition organisation can help you. If you are not covered by a collective agreement or if you are self-employed, we can help you. Not sure if your employer has a collective agreement? Ask your manager, HR department or trade union. If you have several ongoing jobs and more than one employer, you need to check with all your employers whether you are covered by a collective agreement.

Are you covered by a collective agreement?*

Yes

No

Your occupation

I, the applicant, am: *

Self-employed

Employed (on a permanent, temporary or probationary basis)

Laid off/unemployed (from a permanent, temporary or probationary position)

Student

Your employer

If you are employed, laid off, unemployed or a student, fill in information about your current or most recent employer.

Check this box if your employer is foreign and has no Swedish company registration number

Do you have several ongoing jobs?

Yes

No

If you have several ongoing jobs, enter information for the employer where you currently work the most hours.

Company registration number (xxxxxx-xxxx) (does not need to be filled in if you have a foreign employer)

Name of your employer

Place of work (place of work means the town/city where you carry out/have carried out most of your work)*

County (the county where your place of work is located) *

Your company

If you are self-employed, fill in information about your company.

Enter your company's registration number (If the company registration number is your personal identification number, you do not need to fill in this field)

Enter your company name (if you don't have a company name, leave the field blank)

Place of work (place of work means the town/city where you carry out most of your work) *

County (the county where your place of work is located) *

Send the form to

Kammarkollegiet
Den offentliga omställningsorganisationen
651 80 Karlstad

Contact us

Email: ooo@kammarkollegiet.se
Telephone: [054-22 12 00](tel:054-221200)
Website: nysteget.se