

EUTR1

Application for a Residence Card for a qualifying family member of an EEA national

Who is this form for?

Please read the information below carefully before you submit your application. If you do not submit sufficient information and/or evidence to show you qualify for a residence card your application may be refused.

You should use this application form if:

- You are a non-EEA national resident in Ireland who is a qualifying family member of an EEA national
- The EEA national is residing in Ireland
- The EEA national is exercising their EU Treaty Rights in the State (employed, self-employed, residing with sufficient resources, studying or involuntarily unemployed)

Citizens' Rights entitlements guaranteed to United Kingdom nationals and their family members are given effect in Ireland under the European Union (Withdrawal Agreement) (Citizens' Rights) Regulations 2020. Form EUTR1A may also be used by each non-EEA national family member of a United Kingdom national applying for a Residence Document as a Qualifying Family Member of a United Kingdom national under the European Union (Withdrawal Agreement) (Citizens' Rights) Regulations 2020 and the relevant provisions of the 2015 Regulations.

References to EEA national in this form shall be deemed to also apply to a United Kingdom national who satisfies the relevant criteria under the Withdrawal Agreement.

Which qualifying family members can apply on this form?

If the EEA national is residing in Ireland as a student you must be the:

- Spouse or recognised civil partner of the EEA national, or
- Dependent child, under the age of 21, of the EEA national or of their spouse/recognised civil partner

In all other cases, you must be the:

- Spouse or recognised civil partner of the EEA national, or
- Child or grandchild of the EEA national, or of their spouse/recognised civil partner, and be aged under 21, or

- Child or grandchild of the EEA national or of their spouse/recognised civil partner and be dependent, or
- Dependent parent or grandparent of the EEA national or of their spouse/recognised civil partner.

If you are a family member of an EEA national but do not fall within the criteria listed above, you should apply on Form EUTR1A

How to complete this form:

- You must complete a separate application for each non-EEA family member, including each child under 18 years of age.
- You must complete this form in CAPITAL letters
- You must place a tick (✓) in the boxes that are relevant to you
- You must complete all sections of this form which are relevant to you in full
- You must submit photocopies of supporting documents for each application
- You must complete the checklists on pages 28, 29 and 47 for each application
- You, the applicant, must sign and date the declaration on page 30
- The EEA national must sign and date the declaration on page 48
- If you or the EEA national are unable to provide any of the information requested at this time, please explain the reason in writing and enclose with this application
- The application form will not be considered complete and your application may not be processed unless all relevant parts of the application form have been completed fully and all supporting documents have been submitted with the application
- You must send your completed application form and any supporting documents you wish to provide by post to the address below

EU Treaty Rights Division, Immigration Service Delivery, Department of Justice, 13/14 Burgh Quay, Dublin 2, D02 XK70

- Your application may be delayed if you do not send it by post to the address listed above
- We recommend you send your application by registered post
- If you choose to send your application by registered post you can track it on the An Post website, <u>www.anpost.ie</u>

Warning:

If you have a change in circumstances while your application is being processed, for example:

- If you change your personal details (your name, nationality, civil status, etc.)
- If your contact details change (your address, email address or representative etc.)
- If there is a change in other circumstances (your EEA national family member leaves Ireland etc.)

you <u>must</u> inform EU Treaty Rights Division office <u>immediately</u> and provide any relevant supporting documentation.

Data privacy notice

Introduction

1. The data you provide is collected by EU Treaty Rights Division in Immigration Service Delivery (ISD), a Business Unit of the Department of Justice (DoJ). The data controller for the information you provide is the Department of Justice and the data controller's contact details are:

EU Treaty Rights Division,
Immigration Service Delivery
Department of Justice,
13/14 Burgh Quay,
Dublin 2,
D02XK70

How will your personal data be used?

- 2. We may use the personal data you provide in your application for the purpose of:
 - assessing your entitlement or continued entitlement to reside in the State as the family member of the EEA national named in your application, or
 - assessing your entitlement or continued entitlement to reside in the State as the family member of the UK national named in your application, or
 - assessing your entitlement or continued entitlement to permanent residence in the State as an EEA national,
 - assessing your entitlement or continued entitlement to permanent residence in the State as a UK national.

Legal Basis for processing your Personal Data

3. Our legal basis for collecting and processing this data is in accordance with Section 8 of the Immigration Act 2003 and to fulfil the function of the Minister for Justice in relation to asylum, immigration (including visas) and citizenship matters as designated in the Ministers and Secretaries Act 1924 (as amended).

Further processing of your Personal Data

4. Where it is necessary and proportionate to do so, in accordance with the Data Protection Act 2018 and the GDPR, further personal data may be requested or received from/provided to other Public

Authorities/competent authorities/international organisations for the purpose of:

- Verification of the data received under Directive 2004/38/EC, Regulation 26 of the EC (Free movement of Persons) Regulations 2015 as amended, EU (Withdrawal Agreement) (Citizens' Rights) Regulations 2020, section 3 of the Immigration Act 1999.
 - Section 8(1) and 8(2) of the Immigration Act 2003, section 4 of Immigration Act 2004,
- Work Permit application for non-EEA nationals in accordance with Section 37 of the Employment Permits Act 2006;
- Processing applications for residence Section 261(2) of the Social Welfare Consolidation
 Act and Civil Partnership and Certain Rights and Obligations of Cohabitants Act 2020;
- Section 41 of the 2018 Act.
- 5. We may also process your personal data for research or statistical purposes as allowed under the Data Protection Act 2018 and the GDPR.

A competent authority means:

A public authority competent for the prevention, investigation, detection or prosecution of criminal offences or the execution of criminal penalties in the State, including the safeguarding against, and the prevention of, threats to public security, or any other body or entity authorised by law to exercise public authority and public powers for the purposes of the prevention, investigation, detection or prosecution of criminal offences or the execution of criminal penalties in the State, including the safeguarding against, and the prevention of, threats to public security.

Security of Personal Data

- 6. The personal data provided will be stored securely on DoJ servers. It may be shared, where appropriate, with the following third parties:
 - Government Departments and agencies
 - An Garda Síochána
 - EEA competent authorities
 - EEA police forces
 - UK competent authorities
 - Individuals with your consent for example, employer, landlord
 - Service providers of the DoJ, for example, data handling and storage providers, producer of Residence Card/Residence Document/Irish Residence Permit.

Contact for Queries

7. The contact for any queries in relation to this form is EU Treaty Rights Division, Immigration

Service Delivery, Department of Justice, 13/14 Burgh Quay, Dublin 2, D02XK70.

How long will Personal Data be retained?

8. This data will be stored in accordance with the requirements of the National Archives Act 1986.

How to Request a copy of your Personal Data

- 9. You can request a copy of your personal data by completing a Subject Access Request (SAR) form, available:
 - at http://www.justice.ie/en/JELR/Pages/Data Protection or
 - from the Data Protection Support and Compliance Office (DPSCO) at the address below.

Forward the completed form by email to subjectaccessrequests@justice.ie or by post to the DoJ Data Protection Officer at the address below. You will be required to verify your identity before the data can be forwarded to you. The time limit for responding to a SAR commences once your identity has been verified.

Your Rights in relation to your Personal Data

- 10. You have the right to rectify any inaccuracies in your data. To do this you should write to the Data Steward, EU Treaty Rights Division, Immigration Service Delivery, Department of Justice, 13/14 Burgh Quay, Dublin 2, D02XK70, documenting the inaccuracies, which need to be rectified. The right to rectification is not absolute and each request will be considered on its own merits.
- 11. You have the right, where appropriate, to obtain erasure of your data and/or a restriction on the processing of your data as well as the right to object to the processing of your data. The right to erasure, restriction or objection is not absolute and each request will be considered on its own merits.
- 12. You have the right to lodge a complaint with the Data Protection Commission (DPC). You can contact the DPC by webforms on their website www.dataprotection.ie or by post to: 21 Fitzwilliam Square South, Dublin 2, D02 RD28

Further details in relation to your data protection rights can be found in the Department of Justice Data Protection Policy available at: http://www.justice.ie/en/JELR/Pages/Data Protection

Contact the DPO
You can contact the Data Protection Officer (DPO) for the Department of Justice by post at:
Data Protection Officer,
Department of Justice,
51 St. Stephen's Green,
Dublin 2, D02 HK52.
or
by email - dataprotectioncompliance@justice.ie
I acknowledge that I have read and understood the information outlined above, which relates to my data protection rights.
Name (Applicant)
Signature (Applicant) Date
Name of Parent/Guardian if applicant is under 18
Signature of Parent/Guardian Date
Name (EEA national)
Signature (EEA national) Date

Applicant's personal details 1.1 Surname/Family name (as shown in passport) **1.2** Forename(s) (as shown in passport) 1.3 Other name(s) (maiden name, name at birth, any other names) by which you are or have been known 1.4 If you have been known by any other name(s), what dates did you use this/these names? **1.5** If you changed your name, why did you change it? (✓) Marriage/civil partnership Divorce Other If "Other" please explain **1.7** Gender (✓) 1.6 Date of birth Female Other Male **1.8** What is your relationship status? (✓) Recognised Married Divorced Widowed Single civil partner Surviving Unmarried recognised civil partner partner 1.9 Nationality 1.10 Place and country of birth

Section 1

1.11a Do you hold, or have you ever held any other Nationality or Citizenship? (✓)																								
	Y	es	(tick	rele	evar	nt bo	x aı	nd g	ive	deta	ils)							No						
		Citiz	ens	hip																				
	_ N	latio	ona	lity																				
1.11						d on nalit		f the	abo	ove	box	es, p	olea	se g	jive (date	es yo	ou h	eld	this				
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1.11c Details of the citizenship/nationality which you have indicated above																								
1 10	1.12 Current home address in Ireland																							
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1.13	3 Ad	ldre	ss E	irco	de					1.14	4 Cc	nta	ct te	leph	one	nuı	mbe	r of	app	olica	nt			
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1.15) En	nali	add	ress	5														I	Τ				
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1.16	Но	w n	nany	/ far	nily	mer	nbe	rs re	eside	e wit	th yo	ou?												
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Immigration history of applicant

1.21 What date did you move t	to Ireland?								
1.22 GNIB number/IRP numb (if you have one)	er								
1.23 How did you enter Ireland	! ? (✓)								
Airport	Seaport	Land Border							
1.24 Where did you arrive in Ir	eland? (For example, Dublir	n Airport, Rosslare	, Shannon etc.)						
1.25 What was your status on	arrival in Ireland (✓)								
Student	Visitor I	Entry without perm	nission						
Other (please give details):									
1.26 Have you previously appl Member State or the Unit and exit as applicable.	ied for permission to visit or ed Kingdom? (✓) If yes, yo								
Yes (give details below)	No								
Type of permission/visa applied for	Country applied to	Result of application	Duration of permission/visa						
L	1	ı							
1.27 How long do you intend o of a work contract, for the	n staying in Ireland? (for exe e duration of a course of stu		y, for the duration						

1.28 Do you hold or have you previously held, a residence card issued by Ireland or another EU Member State or the United Kingdom? (✓)
Yes (give details below) No
1.29 Have you previously been refused a residence card by Ireland or another EU Member State or the United Kingdom)? (✓)
Yes (give details below) No

Section 1C Applicant's relationship to EEA national

1.30 This section looks for how are you related to the EEA national. Please tick relevant box and fill out the corresponding subsection on this form (✓)
Spouse - Complete subsection (i)
Recognised Civil Partner – Complete subsection (i)
Child aged under 21 of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (ii)
Grandchild aged under 21 of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (ii)
Dependent child aged 21 or over of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (iii)
Dependent parent of the EEA national or their spouse or Recognised Civil Partner – Complete subsection (iii)
Dependent grandchild aged 21 or over of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (iii)
Dependent grandparent of the EEA national or of the EEA national's Spouse or Recognised Civil Partner – Complete subsection (iii)
Subsection (i) Please complete this section if you are the spouse or recognised civil partner of the EEA national
1.31 When did you meet the EEA national? M M / Y Y Y Y
1.32 Where did you first meet the EEA national?

1.33 When did your relationship begin?		
1.34 Are you related to the EEA national outside your ma	rriage or civil partners	hip? (✓)
Yes (give details below) No		
4.25 Do you and the EEA national autrently live together	0 (./)	
1.35 Do you and the EEA national currently live together?	(v)	
Yes No		
1.36 If no, have you ever lived together in Ireland or in an	v other country? (✓)	
Yes No	y out of dodnary. (*)	
1.37 When and where did you start living together?		
, , ,		
1.38 Please provide all addresses where you and the EE	A national have lived t	ogether
Address	Date from	Date to

1.39 When did you decide to marry or form a Recognised Civil Partnership with the EEA national?
1.40 Date of marriage or civil partnership? D D / M M / Y Y Y Y
1.41 Please tick which type of marriage or partnership applies to your relationship with the EEA national (If other give details) (✓)
Recognised Civil Registered Religious/Traditional Proxy
Other (please give details):
1.42 What is the address where your marriage or civil partnership took place?
1.43a Were both you and the EEA national present at the ceremony? (✓)
☐ Yes ☐ No
1.43b If no, please explain where you and the EEA national were at the time of the ceremony.
1.44 Have you previously submitted a notice of intention to marry to a Registrar in Ireland? (✓)
Yes (give date below) No

1.45 Has there been an objection to your intention to marry in Ireland? (✓)
Yes (give date below) No
1.46 Have you previously applied to marry in another country? (✓) If yes, please give the country and the date
Yes No
1.47 Have you previously been refused permission to marry, or had an objection raised against your intention to marry in a country other than Ireland? (✓)
☐ Yes ☐ No
If you answered 'Yes', please provide details here:
1.48 Have you ever been considered to be party to a marriage of convenience by a competent authority in a country other than Ireland? (✓)
authority in a country other than heland: (*)
Yes No
☐ Yes ☐ No
Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes' to the last question, please provide the country, date and any
Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes' to the last question, please provide the country, date and any details of the decision
Yes
Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes' to the last question, please provide the country, date and any details of the decision
Yes
If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes' to the last question, please provide the country, date and any details of the decision COUNTRY DD/MM/YYYYY 1.50 Do you or the EEA national currently have another spouse or civil partner, or an unmarried partner, with whom either of you are in a durable relationship? (✓)
If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes' to the last question, please provide the country, date and any details of the decision COUNTRY DD/MM/YYYYY 1.50 Do you or the EEA national currently have another spouse or civil partner, or an unmarried partner, with whom either of you are in a durable relationship? (✓)

1.51a Have you or the	e EEA national be	en married or in a civil partn	ership before? (✓)
Yes (if yes give	details below)	No	
1.51b Please specify	which party has b	peen married or in a civil part	nership before? (✓)
You (applicant)		EEA national	Both
1.51c Date(s) of divor	rce, annulment or	dissolution (if applicable)	
		a any ahildran tagathar? (/)	
		e any children together? (✓)	
Yes	No		
	y children of whor previous relations	m the EEA national is not the ship)? (✓)	biological parent (for
Yes	No		
103	NO		
Subsection (ii)	Please comp under 21 yea	lete if you are the child rs of the EEA national e EEA national	
Subsection (ii)	Please comp under 21 yea partner of the	rs of the EEA national	or the spouse or civil
Subsection (ii) 1.54 Are you a child o	Please comp under 21 yea partner of the	rs of the EEA national of EEA national	or the spouse or civil e or civil partner of the EEA
Subsection (ii) 1.54 Are you a child of national or both? EEA national 1.55 If your answer to authorisation from birth, as applica	Please compunder 21 year partner of the partner of	rs of the EEA national EEEA national EEEA national or the spous Spouse or civil partr	e or civil partner of the EEA Both there is a formal m your country of origin or rent (or your parents in
Subsection (ii) 1.54 Are you a child of national or both? EEA national 1.55 If your answer to authorisation from birth, as applicate parents in the care	Please compunder 21 year partner of the partner of	rs of the EEA national e EEA national e EEA national or the spous Spouse or civil partr of EEA national than 'Both', please indicate if uthority for your removal fror I consent from your other par	e or civil partner of the EEA Both there is a formal m your country of origin or rent (or your parents in
Subsection (ii) 1.54 Are you a child of national or both? EEA national 1.55 If your answer to authorisation from birth, as applicate parents in the care	Please compunder 21 year partner of the partner of	rs of the EEA national e EEA national e EEA national or the spous Spouse or civil partr of EEA national than 'Both', please indicate if uthority for your removal fror I consent from your other par	e or civil partner of the EEA Both there is a formal m your country of origin or rent (or your parents in

1.56 Do you and the	EEA national currently live together	? (✓)							
Yes	☐ No								
1.57 If no, have you	ever lived together in Ireland or in ar	ny other country? (✓)							
Yes	☐ No								
1.58 When and wher	e did you start living together?								
1.59 Please provide all addresses where you and the EEA national lived together (starting with the most recent address where you have lived together).									
Address Date from Date to									
Subsection (iii)	Please complete if you are: - the dependent child or gra of the EEA national - the dependent child or gra of the spouse or civil partne - the dependent parent or g - the dependent parent or g civil partner of the EEA nati	andchild aged 21 er of the EEA nat randparent of the randparent of the	years or over ional e EEA national						

Complete this subsection if you are a relative of the EEA national, or of their spouse or civil partner, and:

• You were dependent on the EEA national before you came to Ireland, in your country of origin or country from which you have come **OR**

 If the relationship arose within this State and due to this, you cannot show evidence of dependence from your country of origin or country from which you have come, please provide evidence of dependence on the EEA national from the point the dependence started.

Before coming to Ireland **1.60** Were you dependent on the EEA national before you came to Ireland? (✓) Yes No 1.61 If you answered 'Yes' to Q 1.60, please indicate how long have you been dependent on the EEA national? 1.62 Give details below of any other source of income or capital you had before coming to Ireland. This could include income from employment or self-employment, a pension, social security payments, income from rental property, savings, investments or any other income. You should give documentary evidence to show any income with your application. Item Amount € How often **1.63** Did you receive money from the EEA national before coming to Ireland? (✓) If yes, how much, how often and for how long did you receive these funds. You should give corresponding documentary evidence with your application. Yes (give details below) How much did you receive? (€) How often did you receive the funds? How were the funds paid to you?

How long did you receive these funds?

	ner relative or friend before coming to Ireland? (✓) If how long did you receive these funds. You should be evidence with your application.
Yes (give details below) No	
How much did you receive? (€)	
How often did you receive the funds?	
How were the funds paid to you?	
How long did you receive these funds?	
1.65 What was your address in your home came to Ireland?	ne country or other country of residence before you
1.66 Did you live with the EEA national at Ireland? (✓)	t the same address immediately before you came to
Yes No	
1.67 Please provide dates of residence at From DD / MM M / YYYYY	at address To D D / M M / Y Y Y Y
1.68 For the address given above, did the	e EEA national (✓)
Own the property outright either individually	ly or jointly
Own the property with a mortgage either inc	ndividually or jointly
Rent the property	
Reside rent free	
1 69 If the property was jointly owned alo	ease provide the names of the other owners
i the property was jointly-owned, pie	

Private landlord County co	ouncil or local authority	Voluntary coop	erative housing body
71 If the property was rented, pleas	e provide the names	of all tenants:	
72 Who else lived at the property ar	nd what was the relati	ionshin hetween ve	ou and the EEA
national and each resident?	id what was the relati	ionsnip between yo	d and the LLA
Name	Duration of residence	Relationship to you	Relationship to EE
ince coming to Ireland			
73 When did the EEA national enter Ireland?		1.74 When did ye	ou enter Ireland?
D D / M M / Y Y Y Y		DD/MM	
75 If you did not enter Ireland at the why below	same time as the EE	EA national, please	give the reasons
,			

1.77 Do you regularly receive money from and for how long did you receive thes documentary evidence with your app	se funds. You should giv		
Yes (give details below) No			
How much did you receive? (€)			
How often did you receive the funds?			
How were the funds paid to you?			
How long did you receive these funds?			
1.78 Do you regularly receive money from how much, how often and for how lor evidence with your application.Yes (give details below) No			
How much did you receive? (€)			
How often did you receive the funds?			
How were the funds paid to you?			
How long did you receive these funds?			
1.79 If you have any other sources of inco or self-employment, a company or st property, savings, investments, or an the income(s) given with your applica-	ate pension, state benef ny other income). Provide	its, income fron	n rental
Source of income	•	Amount €	How often

1.80 What is your current activity? (✓)
Employed
Self employed
Student
Other (give details below)
1.81 Do you currently live with the EEA national? (✓)
Yes No
1.82 At the address where you reside, does the EEA national: (✓)
Own the property outright either individually or jointly
Own the property with a mortgage either individually or jointly
Rent the property
Reside rent free
1.83 If the property is jointly-owned, please provide the names of all owners
1.84 If the property is rented, please tell us the type of landlord (✓) and give contact details below
Private landlord County council or local authority Voluntary cooperative housing body
40-160
1.85 If the property is rented, please provide the names of all named tenants

			.	.			
1.87 Do you pay ar	ny rent, mortgage or	other payment for	your accommodation	on? (✓)			
	_			,			
Yes (give det	ails below)	No					
Expenditure	Amount	€	Who pays for thi	his expenditure?			
Rent/Mortgage							
Gas							
Electricity							
Phone							
Food							
Clothing							
Medical Care							
Other				<u> </u>			

	tional or physical support you receive, or have received, from the ld provide corresponding documentary evidence with your
1.90 Give details of any famil	y in your home country.
	pelling or compassionate circumstances that would make it difficult me country without the EEA national. You should provide stary evidence.
the EEA national from ex	re to be refused, and you believe that such a refusal would prevent xercising EU Treaty Rights in the State, please explain why you and provide documentary evidence supporting your claim.

Section 2

Applicant's personal history

- This section asks about any criminal convictions you have.
- This section asks about any involvement you may have had in war crimes, genocide, crimes against humanity or terrorism.
- Please note, if you have received more than 3 charges/indictments/convictions, please photocopy the relevant sections and enclose those completed sections with this form
- If you fail to answer all of these questions as fully and accurately as possible, your application for a residence card may be refused

Warning

It is an offence under Regulation 30 of the European Communities (Free Movement of Persons) Regulations 2015 and Regulation 21 of the European Union (Withdrawal Agreement) (Citizens' Rights) Regulations 2020 to make a statement that you know to be false or misleading.

2.1 Have you ever been charged offence for which you have not be	or indicted in Ireland or in any other country with a criminal een tried in court? (✓)
Yes (give details below)	No .
Charge/Indictment No. 1	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Charge/Indictment No. 2	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Charge/Indictment No. 3	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	

please provide details for EA	ACH criminal conviction, starting with the most recent one.
Yes (give details below)	No
Criminal conviction 1	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
Criminal conviction 2	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
Criminal conviction 3	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
	ver been required to comply with conditions following release from probation or restricted licence) (✓) No
Type of condition imposed	
Date condition started	
Term of condition (date of expiry)	
2.2c Did you comply, or are you	in compliance with the imposed conditions or restrictions? (✓)
Yes	No .

2.2a Have you ever been convicted of an offence in Ireland or in any other country? (✓) If yes,

2.3 Have you ever been a member linked with terrorism? (✓)	r of, or given support to, an organisation, which has been
Yes (give details below)	No
	or war time, ever been involved in, or been suspected of crimes against humanity or genocide? (✓)
Yes (give details below)	No
2.5 Have you ever been involved in (✓)	n, supported, or encouraged terrorist activities in any country?
Yes (give details below)	No
2.6 Have you ever served in a milit military or paramilitary training,	tary force or State-sponsored private militia, undertaken any or been trained in the use of weapons and/or explosives? (✓)
Yes (give details below)	No
2.7 Have you ever been deported/i	removed from Ireland or from any other country? (✓)
Yes (give details below)	No
Date of deportation/removal	
Country deported/removed from	
Country deported/removed to	

2.8 Are you, or have yo Ireland or any other		a deportation, exclusion o	or removal order in
Yes (give details be	elow) No		
Type of order			
Date of order			
Status of order			
		enter or remain in any oth	er country? (✓)
Type of permission denied	elow)		
Name of country			
photocopy this sec	ction and submit with this		·
			If necessary, Length of stay
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·
photocopy this sec	ction and submit with this	s application?	·

Applicant's document and evidence checklist

- Please complete this checklist to show what documents you are providing with your application
- If you do not submit evidence to show that you qualify for residence, your application may be considered incomplete and may be refused
- If you wish to send any documents that are not in English, you must get the document translated by a qualified professional translator. The translator must confirm in writing on the translation:
 - ✓ that the translation is a true and accurate translation of the original document
 - ✓ the date of the translation
 - ✓ the full name and contact details of the translator or representative of the translation company
 - Multilingual standard forms of certain public documents, civil certificates issued within the EU may be available without the necessity to obtain a certified translation. For further details, visit the following webpage:-https://e-justice.europa.eu/551/EN/public documents
- Immigration Service Delivery will not provide written correspondence acknowledging each document you submit with this application

	Description	Tick if you have submitted (√)	Number of pages	For Official Use
	Identity documents			
1.	Passport of the applicant			
2.	Passport/National Identity Card of the EEA national			
3.	2 passport photos for both the applicant and the EEA national			
4.	Evidence of name change (if relevant)			
	Residency documents if renting			
5.	Tenancy Agreement			
6.	Letter from landlord/letting agent including contact details			
7.	Letter from local authority/County Council			
8.	Utility bills in your name and the EEA national's name			
9.	Bank statements			
10.	Evidence of rent payments			
	Residency documents if a home owner			
11.	Title or Deeds as applicable			
12.	Letter from Mortgage Provider/Local authority/County Council			

13.	Utility bills in your name and the EEA national's name		
	Residency documents if living with a home owner		
14.	Evidence of home ownership, e.g. title deeds/letter from mortgage provider		
15.	Utility bills in the home owner's name		
16.	Letter from the home owner confirming your and the EEA national's residency there		
	Residency documents if you are living with a tenant		
17.	Tenancy agreement in their name		
18.	Letter from the tenant confirming the residence of you and the EEA national including contact details		
19.	Letter from landlord confirming the residence of you and the EEA national including contact details		
20.	Utility bills in the tenant's name.		
	Evidence of relationship		
21.	Civil marriage certificate		
22.	Recognised civil partnership certificate		
23.	Birth certificate		
24.	Evidence of guardianship/custody papers/ adoption papers		
25.	Evidence of divorce, annulment, dissolution of previous marriage or civil Partnership		
26.	Copy of any previously held residency card in Ireland or any other country		
	Evidence of dependency		
	Evidence of dependency (such as money transfer receipts, corresponding bank statements etc.) since arrival in the State		
	Evidence of dependency (such as money transfer receipts, corresponding bank statements etc.) in the country from which you have come / or where the relationship has arisen in the State, evidence of dependency from the time that dependency started.		
29.	Evidence of strictly requiring the care of the EEA national (such as a detailed medical report from a professional registered with the Irish Medical Council)		
	Previous immigration or residence documents (such as registration certificates, residence card, residence permit or previous passports) both in the State <u>and</u> in the country from which you have come		
	Any other documents you have submitted in this application		
31.			
32.			
33.			
34.			
35.			

Section 4

Applicant's declaration

You (the applicant) must read the declaration below and sign it. It must be signed by you and not by a representative or other person acting on your behalf. If you are under 18, your parent or guardian may sign it.

Warning: If you do not submit a signed declaration your form will be returned to you.

I hereby apply for a residence card for myself. The information I have given is complete and is true to the best of my knowledge. I also declare that the photographs submitted with this form are a true likeness of me. I confirm that if, before my application is decided, there is a material change in my circumstances or new information relevant to this application becomes available, I will inform the EU Treaty Rights Division of the Department of Justice in writing immediately. I understand that any false or misleading information or fraudulent supporting documentation submitted will result in the refusal of this application.

I acknowledge that the EU Treaty Rights Division may make enquiries to confirm any of the details or documents provided by me in this application, including my participation in an interview process.

I am aware that a person who asserts an entitlement to any rights on the basis of information which he or she knows to be false or misleading in a material particular shall be guilty of an offence and shall be liable on summary conviction to a fine not exceeding €5,000 or to a term of imprisonment not exceeding 12 months, or both.

Name of applicant (BLOCK CAPITALS)													
Date	Signed by applicant												
Name of parent/guardian of applicant i	if aged under 18 (BLOCK CAPITALS)												
Date													
Signed by parent/guardian of applican	t if aged under 18												

Sec	tion	5				EE	A ı	nati	ona	al's	de	tail	s									
5.1 Si	urnam	e / f	ami	ly na	ame	(as	in p	ass	por	t)												
5.2 Fo	orenar	ne(s	s) (a	ıs in	pas	spo	rt)															
5.3 Other name(s) (maiden name, name at birth, any other names by which you are or have been known)																						
5.4 D	5.4 Dates during which you have used this/these names																					
5.5 R	eason	for	nan	пе с	han	ge (if ap	plic	able	e) (~	()											
M	larriag	e/Ci	vil p	artr	ners	hip		Div	orc/	е				Oth	er							
If "oth	er" ple	ease	e ex	plair	า																	
5.6 D	ate of	birth	1						5.7	' Ge	nde	r (✓)									
D)/[M	M /	/ Y	Y	Y	Y	,				Male					Fen	nale			Ot	ther
5.8 R	elatior	nship	sta	atus	(√)																	
Si	ingle				Mar	ried						gnis part			Di	vorc	ed		Wic	lowe	ed	
	nmarri artner	ied			Sur\ Rec Civil	ogni	ised	l r														
5.9 N	ationa	lity																				

5.10	5.10 Place and country of birth																								
5.11	5.11 Do you hold, or have you ever held any other nationality or citizenship? (✓)																								
	Yes (please tick the relevant box and																								
															No										
	\ \ (Citiz	'en	shi	n																				
	_	lati																							
D																Y									
	5.12 Current home address in Ireland																								
5.12	.12 Current home address in Ireland																								
5.13	3 Ac	ldre			cod	е					5.1	4 C	onta	act te	elep	hon	e nu	ımbe	er						
5.15	5 En	nail	ad	dre	ss																				
5.16	S PF	S r	nun	nbe	r (if	ар	plic	able	e)																
5 13	7 Da	eer	ort	/na	tion	ا اد	ider	ıtitı,	car	d ni	umbe	۵r			5 4	173	Evni	iry d	ata	of E)200	enor	t		
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																D	/	M		VI	/ [Υ	Υ	Υ	Υ

Section 5A

Immigration history of the EEA national

5.18 What date did you move to Ireland?
D D / M M / Y Y Y
5.19 How did you enter Ireland? (✓)
Airport Seaport Land border
5.20 Where did you arrive in Ireland? (For example, Dublin Airport, Rosslare, Shannon etc.)
5.21 Have you previously resided in Ireland? (✓) If yes give details and dates
Yes (give details below) No
5.22 How long do you intend to stay in Ireland?

Section 5B EEA national's current activity in Ireland

This section asks for details on your current activity in Ireland. The section is divided into five parts. Please only complete the section which is relevant to you, (for example if you are employed, you should complete Section A.

5.23 Plea	se indicate the type of activity (✓)
	Employment – Complete Section A
	Self-employment – Complete Section B
	Study – Complete Section C
	Involuntary Unemployment – Complete Section D
	Sufficient Resources – Complete Section E

Section A For an EEA national who is in employment

Complete this section if you are currently working for an employer. Please note, you must also submit a fully completed Employer Declaration in addition to the required employment documents with this application. This declaration is set out in Appendix 'A' of this application form.

5.2	5.24 Name of employer																			
	5.25 Contact name															•				
5.2	5 C	onta	ct na	ame																
5.26 Email address of employer																				
5.2	7 Co	onta	ct te	leph	one	nur	mbe	r of	emp	oloy	er									

5.28 \	Workp	olace	ado	dres	s															
5.30	5.29 Workplace Eircode 5.30 Start date for employment																			
5.31 ⁻	5.31 Type of contract, e.g. fixed term/temporary/permanent																			

Section B For an EEA national who is self-employed

Complete this section if you are a self-employed EEA national

5.3	5.32 Name of business																						
5.3	5.33 Class of self-employment (✓). If other, give details																						
	Sole Trader Partnership													Li	mite	ed co	omp	any					
		Oth	er:																				
5.3	5.34 Type of business (e.g. services offered, products made/sold)																						
E 2	5.35 Address of business																						
5.3	5 <i>F</i>	Naai	ess	5 0	ı bu	Sine	55																
5.3	6 ⊦	low	do	yo	ou, tl	he E	EEA	nati	ona	l, ac	lver	ise	the	bus	ines	s?							
5.3	7 (Con	tact	te	leph	one	nu	mbe	r of	bus	ines	s											
5 3	QE	ma	il a	ddi	racc	of k	auci	ness	•														
5.5		-1116	ııı a	uui	C33		Jusi	11033	>														
5.3	9 V	Veb	site	a	ddre	ess f	or th	ne b	usir	ess	if a	pplic	cabl	е									

5.40 Date business started trading	5.41 Number of employees								
5.42 Date you registered with Revenue for self-assessment									
5.43 Has a P35 return or equivalent been made for the busin	ness? (✓)								
Yes No									
5.44 Date on which tax returns are due	5.45 Do you pay PRSI? (✓)								
	Yes No								
5.46 Is the business registered for VAT? (✓)									
Yes No									
5.47 Name of accountant/tax advisor if applicable									
5.48a Are you a director of the company in which you are se	elf-employed? (✓)								
Yes No									
5.48b If yes, do you pay PAYE returns? (✓)									
Yes No									
5.49 What is your role in the business									
5.50 Monthly operating costs	5.51 Monthly net income								
€	€								
5.52 Hours worked monthly									

Section C

For an EEA national who is studying

Complete this section if you are undertaking a course of study which is on the interim list of eligible programmes (ILEP)

5.53	5.53 Name of college/institution																							
5.54	ı Nıc	mo	of c	our	20																			
5.54	HINC		01 0	Jours	50		Ι	1	Ι	1			I	1	I	<u> </u>	I	1	l	I	<u> </u>	I		
5.55 Qualification																								
			ı	ı				1	l						ı			1	1	1		1		
5.56	5.56 Awarding body																							
	5.50 Awarding body																							
														•					•	•		•		
5.57	'Is	the	cou	rse (deliv	/ere	d via	a dis	tan	ce le	earn	ing?	? (✓)										
5.57 Is the course delivered via distance learning? (✓)Yes - In fullYes - In partNo – In person only																								
Yes - In Tull Yes - In part No – In person only																								
													INO ·	– IN	þei	5011	Offic	/						
5.58				or co	olleg					ı			INO ·	- IN	pei	5011	Ulliy	/		Γ		ı		
5.58					olleg								INO .	- III	pei	5011								
	3 W	ebsi	te fo	or co		je/in	stitu	tion						- III	pei	SOIT								
	3 W	ebsi	te fo			je/in	stitu	tion						- III	реі	SOII								
	3 W	ebsi	te fo	or co		je/in	stitu	tion							рег	SOIT								
	3 W	ebsi	te fo	or co		je/in	stitu	tion						- IN	pei	SOIT								
	3 W	ebsi	te fo	or co		je/in	stitu	tion						- 111	per	SOIT								
5.59	3 Wo	ebsi	ss o	of co	llege	e/ins	stitut	ion						- 111	pei	5011	Offiny							
5.59	3 Wo	ebsi	ss o	or co	llege	e/ins	stitut	ion			on				pei	5011	Offiny							
5.59	3 Wo	ebsi	ss o	of co	llege	e/ins	stitut	ion			on				pei	5011	Offiny							
5.59	Add	Idre	ss o	or co	llege	e/ins	stitut	ion	/insi		on													
5.59	Add	Idre	ss o	of co	llege	e/ins	stitut	ion	/insi		on							cours	se e	nd?				

5.63 Intended activity on co	empletion of course	
		unemployment/social assistance,
	ry, income from relative/friend, in r). State how much you receive ar	nd how often (e.g. weekly, monthly,
annually)		
Source of income	How much you receive	How often do you receive it?
5 65 Name of the person(s)) providing financial support	
3.03 Name of the person(s)	providing illianolal support	
5.66 Method of payment (i.e.	e. cash, bank transfer etc.)	
	,	
- 07 D		15
residing with you in Ire	ensive medical insurance for you eland? (✓)	rseit and your dependents
├─ Yes (give details		
below)	No	

Section D

For an EEA national who is involuntarily unemployed

If you are temporarily unable to pursue work, please give details below

5.68 Name of most recent e	employe	er														
5.69 Address of most recen	nt emplo	yer														
5.70 Contact telephone for most recent employer																
5.71 Date most recent employment started D D / M M / Y Y Y Y D D / M M / Y Y Y Y																
5.73 Why did this employm	ent end	?														
5.74 Are you registered with of Social Protection (D			ent		5.7		e yo SP?		rec	eipt	of a	ny p	oayn	nent	froi	m
Yes No						Y	es			N	0					
5.76 If you are in receipt of	any pay	ments	from	n DS	SP, p	olea	se p	rovi	de d	leta	ils b	elov	٧.			
Type of payment	Da	ite pay	men	its s	tart	ed		Aı	moı	ınt y	/ou	rec	eive	(we	ekl	y)

Section E

For an EEA national who is residing with sufficient resources

Complete this section if you so as not to become a finar		ough financial resources available
5.77 Date you first resided is sufficient resources DD MM M / Y Y	n the State with	
5.78 Source of income (✓)	If other, give details	
Pension Stock Other	ks/Shares etc.	rd party funds
5.79 Are you receiving any	State funds from this or any other	State? (✓)
Yes (give details below)) No	
E 90 Name of parson who s	owns the funds available to you th	oo FFA notional their relationship
to you and their curren		ne EEA national, their relationship
5.81 Amount of funds availa	able	
5.82 If funds are from a third	d party, please provide details be	ow
Method of payment	Regularity of payments	Amount you receive
5.83 Monthly living expense Expenditure	es for you and your dependants Amount	

Rent/Mortgage		
Gas		
Electricity		
Phone		
Food		
Clothing		
Medical Care		
Other		
5.84 Do you have residing with	ve comprehen th you in Irela	sive medical insurance for yourself and your dependents nd? (✓)
Yes (give de	etails below)	No
Insurance provide	r	
Name of plan and	policy number	
When did the plan	commence?	
Evidence of paym	ent	
Other (please pro	vide details)	

Section 6 EEA national's personal history

- This section asks about any criminal convictions you have.
- This section asks about any involvement you may have had in war crimes, genocide, crimes against humanity or terrorism.
- Please note, if you have received more than 3 charges/indictments/convictions, please photocopy the relevant sections and enclose the completed sections with this form
- If you fail to answer all of these questions as fully and accurately as possible, your application for a residence card may be refused

offence for which you have not bee	licted in Ireland or in any other country with a criminal n tried in court? (\checkmark) If you have received more than 3 copy this page and enclose the completed section with
Yes (give details below)	No
Charge/Indictment No. 1	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Date of trial	
Charge/Indictment No. 2	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Date of trial	
Charge/Indictment No. 3	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Date of trial	

please provide details for EACI	of an offence in Ireland or in any other country? (✓) If yes, H criminal conviction, starting with the most recent one. If criminal convictions, please photocopy this page and with this form.
Yes (give details below)	☐ No
Criminal conviction 1	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
Output and a constant on O	
Criminal conviction 2	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
6.2b Are you now, or have you ever from prison? (for example a period of	been required to comply with conditions following release of probation or restricted licence)(✓)
Yes (give details below)	No
Type of condition imposed	
Date condition started	
Term of condition (date of expiry)	
6.2c Did you comply, or are you in (✓)	compliance with the imposed conditions or restrictions?
Yes	No

				ever been involved in, or been suspected of umanity or genocide? (✓)
	Yes (give details below)		No	
	lave you ever been invol ountry? (✓)	ved in, supp	oorted,	or encouraged terrorist activities in any
	Yes (give details below)		No	
	lave you ever been a me ssociated with terrorism?		given s	support to an organisation, which has been
	Yes (give details below)		No	
				State-sponsored private militia, undergone any ed in the use of weapons and/or explosives? (✓)
	Yes (give details below)		No	
6.7 ⊢	lave you ever been depo	rted/remove	ed from	Ireland or from any other country? (✓)
	Yes (give details below))	No	
Date o	of deportation/removal			
Count	ry deported/removed from			
Count	ry deported/removed to			

5.8 Are you, or have you Ireland or any other c		to a deportation, exclusion	or removal order in
Yes (give details belo	w) No		
ype of order			
Date of order			
Status of order			
5.9 Have you ever been o	denied permission t	o enter or remain in any oth	ner country? (✓)
Yes (give details belo	w) No		
ype of permission denied			
lame of country			
Date of denial of permissior	1		
Country	Date of Travel	Reason for visit	Length of stay
photocopy this section an			1
Country	Date Of Travel	Reason for visit	Length of Stay
	s, please provide n	nd or any other country of w ames, dates of birth and cu	
i se (give detaile be			
	,		

EEA national's document and evidence checklist

	Evidence of the EEA national's current activity in the State	Tick if you have submitted (✓)	Number	For Official Use
	If the EEA national is in employment			
1.	Declaration signed and stamped by employer (appendix 1)			
2.	Signed and dated contract of employment			
3.	2 payslips for each of last three months			
4.	Most recent P60 certificate or Employment Detail Summary or amended tax credit certificate (or equivalent)			
5.	Corresponding bank statements to show earnings			
	If the EEA national is self-employed			
6.	Agreed tax assessment from Revenue for last financial year			
7.	Letter of registration for self-assessment of income tax (Revenue)			
8.	Certificate from Companies Registration Office			
9.	Sales/Service invoices for the last 6 months			
10.	Corresponding bank statements for the business for the last 6 months			
	If the EEA national is studying			
11.	Letter from course provider, including course description, start date and end date			
12.	Letter from medical insurance provider for EEA national and dependents			
13.	Copy of comprehensive health insurance policy			
14.	Evidence of payment of comprehensive health insurance policy			
	If the EEA national is involuntarily unemployed			
15.	Letter from Department of Social Protection outlining any benefits which have been received			
16.	Letter from most recent employer outlining circumstances of redundancy			
17.	P45 certificate (or Employment Detail Summary) for last employment			
18.	P60 certificates (or Employment Detail Summary) for previous 2 years			
	If the EEA national is residing with sufficient resources			
19.	Evidence of EEA national's financial resources e.g. bank statements			
20.	Letter from Department of Social Protection outlining any benefits which have been received			
21.	Letter from medical insurance provider for EEA national and dependents			
22.	Copy of comprehensive health insurance policy			
23.	Evidence of payment of comprehensive health insurance policy			

EEA national's declaration

You (the EEA national) must read the declaration below and sign. It must be signed by you and not by a representative or other person acting on your behalf. If you are under 18, your parent or guardian may sign it.

Declaration

The information I have given is complete and is true to the best of my knowledge. I also declare that the photographs submitted with this form are a true likeness of me. I confirm that if, before my application is decided, there is a material change in my circumstances or new information relevant to this application becomes available, I will inform the EU Treaty Rights Division of the Department of Justice in writing immediately. I understand that any false or misleading information or fraudulent supporting documentation submitted will result in the refusal of this application.

I acknowledge that the EU Treaty Rights Division may make enquiries to confirm any of the details or documents provided by me in this application, including my participation in an interview process.

I am aware that a person who asserts an entitlement to any rights on the basis of information which he or she knows to be false or misleading in a material particular shall be guilty of an offence and shall be liable on summary conviction to a fine not exceeding €5,000 or to a term of imprisonment not exceeding 12 months, or both.

Name	Name of EEA national (BLOCK CAPITALS)																					
Date										Signed by EEA national												
D D	/ M	M	/ Y	Y	Y	Y	,															
Name	of pare	ent/g	uard	lian	of I	EEA	nat	tion	al if	age	ed u	nde	r 18	3 (B	LOC	CK C	CAP	ITA	LS)			
		11:				1									1	1				1		
Date																						
D D	/ M	M	/ Y	Y	Y	Y	,															
Signed	l by pa	arent/	'gua	rdia	n o	f EE	A n	atio	nal	if a	ged	und	der	18								

Appendix A EEA national's declaration of employment

- This section asks about the EEA national's employment.
- Please give details of your employer below.
- If you have more than one employment, you should copy Appendix A and B, complete for every employment and enclose with the application
- Please also provide proof of your income or salary
- Wage slips for the last 3 months and bank statements showing receipt of income should be provided.
- Please complete the checklist on page 49
- Immigration Service Delivery may contact your employer to verify the information you provided.

A 1	A1 Name of employer (business or company)																							
	_	_	-	_																				
A2	Тур	e of	bus	ines	ss (e	e.g. :	serv	ices	offe	ered	l, pro	odu	cts r	nad	e/so	ld)			ı	ı	I	ı		
						•																		
А3	Add	ress	s of	busi	nes	s																		
	_		_								_							,						
A4	Bus	ines	ss E	rcod	de					A5	Coi	ntac	t tel	epho	one	nun	nber	tor	emp	oloy	er	ı	ı	
A6	Wha	at da	ate d	did y	ou s	start	you	ır en	nplo	yme	ent v	vith	the	bus	ines	s?								
D	D]/[М	M /	/ <u>Y</u>	Υ	Y	Y	,															
Α7	How	/ ma	any l	hour	rs pe	er w	eek	do y	ou '	wor	k on	ave	erag	e?										
Δ۵	Sala	arv/\	Nad	66																				
	Jaio	aiy/\ 	i vay	C2]																
€																								

A9 Frequency of payment (✓)	
Weekly Fortnightly Monthly	
A10 Please indicate what type of employment this is (✓)	
Permanent full time Part time Temporary	
If you answered temporary, please give the expected duration of the contract	

Appendix B

Employer's declaration

- This section must be completed in full and submitted with your application form and should be stamped where applicable.
- It must be signed and dated by your employer/s
- ISD may contact your employer to verify the information provided

B1	Nan	ne c	of bu	isine	ess	or co	omp	any															
B2	Тур	e of	bus	sines	ss (e	e.g.	serv	ices	offe	ered	l, pr	odu	cts r	nad	e/sc	old)							
В3	Add	lress	s of	busi	ines	s																	
B 4	Bus	sines	ss E	irco	de					В5	Cor	ıtact	tele	epho	ne	num	ber	for	busi	nes	s		
В6	Wh	at d	ate (did t	his	pers	on s	start	the	ir er	nplo	yme	ent v	vith	the	bus	ines	s?					
D	D		M	M	/	Y	Y	Y	7														
В7	Hov	v ma	any	houi	rs po	er w	eek	do t	hev	WOI	rk oı	n av	erac	ge?									
В8	Sala	ary/\	Wag	jes																			
€																							
В9	(✓)) Fre	eque	ency	of p	oayr	nent	•															
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B10 Method of payment (✓)
Cash Cheque EFT (electronic funds transfer) Other (Please explain below)
B11 Please indicate what type of employment this is (✓)
Permanent full time Part time Temporary
B12 Name (employer or authorised person)
B13 Position held in the company
I can confirm that (name of employee) has been, and
is currently, employed by (name of company) as set out
above.
above.
B14 Signature
B15 Date
B16 Company stamp or seal (If you do not have one, state "none")