

Application for child allowance

Complete the details in the application in block letters and mark the corresponding information as follows



A Data on the applicant

Surname

Name

Marital status ¹⁾

Date of birth

ID number (identification number)

Nationality

Permanent address in Slovakia ²⁾

Temporary address in Slovakia ²⁾

Street

number

Postal code

City

Phone number

Temporary residence permitted

from

to

Permanent address (residence) in EU member state

Street

number

Postal code

City

Phone number

State

B The applicant is

1. a parent of a dependent child
2. a parent to whom a child was entrusted in personal care based on a court decision
3. a person to whom a dependent child is entrusted with care replacing parental care, on the basis of a valid court decision
4. an adult dependent child without parents
5. an adult dependent child who has an adjusted maintenance obligation from the parents
6. an adult dependent child who, until reaching the age of majority, was entrusted with the care replacing the parental care
7. an adult dependent child who has entered into a marriage or whose marriage has ended
8. a minor parent who has been granted parental rights and obligations

C Social status of the applicant ³⁾

1. employee
2. self-employed person
3. employee and self-employed person
4. pension recipient
5. unemployment benefit recipient
6. unemployed
7. student
8. stateless person
9. refugee
10. other

specify

D

I am claiming child allowance from

indicate the date

Numerical references are given on page 5

E	<i>Data on dependent children for whom child allowance is claimed</i>					
	1.	2.	3.	4.	5.	6.
Name and surname						
Date of birth						
Personal ID						
Permanent address						
Temporary address ²⁾						
Attending school (address, registered office)						
Relationship between the child and the applicant ⁴⁾						
A child with a long-term adverse health condition ⁵⁾						

Numerical references are given on
page 5

J**Declaration of the applicant**

I declare that we do not stay / stay with the dependent child/children in a state that is not a member state of the European Union, a contracting party to the Agreement on the European Economic Area or the Swiss Confederation, and that during the stay in this state I have mandatory public health insurance in the Slovak Republic.

I declare that no other natural person has claimed the right to child allowance for the child children listed in part E of the application, that all the information in this application are true and that I will notify the Office of Labour, Social Affairs and Family in writing or by electronic means with guaranteed electronic signature within 8 days of any change or decisive facts that affect the creation of the right, the duration of the right and the payment of the child allowance in accordance with the provisions of Section 14 (1) of Act No. 600/2003 Coll. on child allowance and on amendments to Act No. 461/2003 Coll. on social insurance, as amended.

I am aware that I am obliged to return the wrongly received amount of child allowance.

Information for the applicant

The Office of Labour, Social Affairs and Family - ID No. 30794536 - processes your personal data (including personal data of jointly assessed persons) pursuant to Act No. 600/2003 Coll. on child allowance and on amendments to Act No. 461/2003 Coll. on social status, as amended, and further provides the above personal data to public authorities. In case of any doubts, problems, questions related to the protection of personal data, you can contact the email address:

ochranaosobnychudajov@upsvr.gov.sk

Date

Signature of the applicant

K**Data correctness checked against the original copy by**

Surname

Name

Date of check

Signature of the employee

L**To be completed by the Office of Labour, Social Affairs and Family – the last payer of child allowance**

The Office of Labour, Social Affairs and Family in

confirms that it has paid the entitled person

name

surname

personal ID

most recently on

the child allowance in total amount of

EUR

Date



Stamp

Signature of the employee

Numerical reference to filling out the application

- 1) e.g.: married, single, divorced, widowed
- 2) the relevant type of stay in the Slovak Republic mark according to the example, while temporary stay applies only to foreigners
- 3) in table C and I, list all social statuses that apply to the applicant, or that apply to the second entitled person (e.g. employee and pension recipient, employee and material need benefit recipient, etc.); also enter the relevant state in the box, including Slovakia
- 4) indicate the relationship between the child and the applicant with the appropriate letters:
 - A. own child without being entrusted by the court to one of the parents
 - B. own child entrusted to the applicant by court decision
 - C. a child entrusted to the applicant for care replacing parental care by a valid court decision
(in the cases listed under letters B and C, state the date of custody given in the court decision on custody of the child)
 - D. the applicant is an adult dependent child.
- 5) the applicant states "yes" if he/she has a child with a long-term adverse health condition who, after completing compulsory schooling, is unable to consistently prepare for a profession by studying and performing gainful activity,
- 6) to a bank account or to an account in a branch of a foreign bank in the Slovak Republic

For the purpose of comparing the data provided in the application, the applicant shall submit:

- ID card (identification card) of the applicant, or travel document,
- travel document and document on the permit for permanent or temporary residence in the territory of the Slovak Republic of the applicant – foreigner,
- travel document and card of a foreign Slovak (foreign Slovak)

The applicant shall attach the following documents and confirmations to the application

- a confirmation from the attending physician about the child's illness or injury, due to which the child cannot continuously prepare for a future profession by studying or perform a gainful activity,
- an opinion on the child's long-term adverse health status issued by the relevant Office of Labour, Social Affairs and Family (information is available from the Office IS),
- confirmation from the health insurance company about mandatory public health insurance in the Slovak Republic, in case the applicant and the dependent child stay in a state that is not a member state of the European Union, a contracting party to the Agreement on the European Economic Area or the Swiss Confederation (section J),
- according to the request of the Office of Labour, Social Affairs and Family, additional documents for the purpose of paying benefits within the EU,
- **If the entitled person is a minor mother and the court has legally decided** on the granting of parental rights and obligations in relation to the personal care of the child, **the applicant shall provide the following data from the last court decision:**
ECLI code (indicated in the court decision): **OR**
File number of the court decision:**Date of the court decision**.....
Name of the court:
- **If the court has legally decided to entrust the child** to the care replacing the parents' care, or has decided to entrust the child to the care of one of the parents, **the applicant shall provide the following data from the last court decision:**

ECLI code (indicated in the court decision): **OR**

File number of the court decision:Date of the court decision.....

Name of the court:

Based on the above, the applicant shall not submit a copy of the court decision.

Proof of providing care for a child after reaching three years of age:

- notice on providing care for a child for the purpose of child allowance (only applies to dependent children who have reached the age of three),

Proof of dependent child:

- confirmation from the elementary school about the completion of compulsory schooling, if the child continues to complete it even after reaching 16 years of age (e.g. a student with a disability), for each school year until its end,
- confirmation from a high school or university about the continuous preparation of a child for a profession through full-time study while **studying abroad** – applies in the case of a child **who has finished compulsory schooling**,
- decision on the equivalence of study (decided by the Ministry of Education, Science, Research and Sports of the Slovak Republic, the Centre for Academic Recognition) - applies **in the case of studying abroad**,
- official translation of the confirmation of the child's specific study abroad (valid only when proving in the first year of study and further only when changing the study program or studying at another university abroad).

Advice

Obligations of the entitled person for child allowance and supplemental allowance (the "allowance")

According to Section 14 (1) of Act No. 600/2003 Coll. on child allowance and on amendments to Act No. 461/2003 Coll. on social insurance as amended (hereinafter referred to as the "Child Allowance Act"), the entitled person is obliged to:

- demonstrate decisive facts that affect the right to allowance, the duration of the right and the payment;
- notify in writing within eight days of changes in the decisive facts that affect the right to the allowance and its payment or submit a notice of these changes signed with a qualified electronic signature by electronic means within eight days,
- ensure the use of the allowance for the upbringing and maintenance of a dependent child.

According to Section 14 (2) of the Child Allowance Act, the entitled person is obliged to notify the payer in writing or by electronic means with a guaranteed electronic signature, after the dependent child reaches three years of age, how and where care will be provided for this dependent child until the beginning of compulsory school attendance, during the duration of the right to allowance, this does not apply if the care of the dependent child is provided by the parent of the dependent child or the person to whom the dependent child is entrusted with care replacing parental care on the basis of a court decision and if this person receives maternity benefit or parental allowance.

Done at dated
Signature of the applicant