# Žiadosť o náhradné výživné

(Údaje v žiadosti vyplňujete paličkovým písmom a zodpovedajúci údaj označte podľa tohto vzoru)

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| **A.** | | | **Údaje o žiadateľovi – nezaopatrené dieťa/oprávnená osoba** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Priezvisko (Titul) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Meno | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Rodinný stav | | | | | | | | |  | | |
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|  | Deň, mesiac, rok narodenia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | | | Rodné číslo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Štátna príslušnosť | | | | | | | | |  | | |
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| Škola, ktorú dieťa navštevuje   |  | | --- | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **B.1** | | | **Údaje o zákonom zástupcovi žiadateľa – rodič/fyzická osoba, ktorej je nezaopatrené dieťa zverené** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Priezvisko (Titul) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Meno | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Rodinný stav | | | | | | | | |  | | |
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|  | Deň, mesiac, rok narodenia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | | | Rodné číslo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Štátna príslušnosť | | | | | | | | |  | | |
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|  | Adresa trvalého pobytu | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  | Ulica | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | Číslo | | | | | | | | | | |  | | | | | | | | | | | |  | | | | Telefón | | | | | | | |  | | | | | | | | |  | | |
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|  | | Adresa prechodného pobytu/kontaktná adresa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | Ulica | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | Číslo | | | | | | | | | | |  | | | | | | | | | | | |  | | | |  | | | | | | | |  | | | | | | | | |  | |
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***Poznámka: Ak nie je(nezaopatrené dieťa (oprávnená osoba) plnoleté o náhradné výživné žiada rodič alebo iná fyzická osoba, ktorej má povinná osoba platiť výživné.***

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| **B.2** | | | **Údaje o zákonom zástupcovi žiadateľa - zariadenie sociálnoprávnej ochrany detí a sociálnej kurately** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Názov zariadenia   |  | | --- | |  |   IČO   |  | | --- | |  |   Adresa zariadenia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| Ulica | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Číslo | | | |  | | | | | | | | |  |
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| PSČ | | | | |  | |  | |  | |  | |  | |  | |  | |  | Obec | | | |  | | | | | | | | | | | | | | | | | | | | | | |  |
| |  | | --- | | / |   e- mailová adresa /telefón   |  | | --- | |  |   Meno, priezvisko a titul štatutára | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

***Poznámka: O náhradné výživné žiada zariadenie sociálnoprávnej ochrany detí a sociálnej kurately, v ktorom je oprávnenej osobe poskytovaná starostlivosť pobytovou formou, z dôvodu výkonu rozhodnutia súdu o nariadení ústavnej starostlivosti, výkonu neodkladného opatrenia súdu alebo výkonu rozhodnutia súdu o uložení výchovného opatrenia ústavná starostlivosť.***

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| **C**. |  |
| Žiadam o poskytnutie náhradného výživného z dôvodu: | |
| 1. neplatenia výživného povinnou osobou vo výške určenej rozhodnutím súdu alebo vo výške rozdielu medzi výškou výživného určeného rozhodnutím súdu a výškou zaplateného výživného povinnou osobou | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  | áno |  |  | nie | | |
| b) že oprávnenej osobe nevznikol nárok na sirotský dôchodok alebo sirotský výsluhový dôchodok | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  | áno |  |  | Nie | | |
| 1. že úhrn súm sirotského dôchodku a sirotského výsluhového dôchodku po jednom rodičovi je nižší ako 0,7-násobok sumy životného minima pre nezaopatrené dieťa | |
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| **D.** | **Údaje o zomrelom rodičovi** | | | | |
| Meno a priezvisko | | Deň, mesiac a rok úmrtia | Dátum narodenia  rodné číslo |  | Príbuzenský  vzťah |
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| **E.** | | | | **Spôsob výplaty** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
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|  | | | | NNa účet v banke v SR | | | | | | | | | | | | | | | | | | IBAN | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| V prípade neuvedenia účtu sa príspevok vyplatí/bude vyplácať v hotovosti na adresu trvalého pobytu         v SR/prechodného pobytu v SR\*. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | \*nehodiace sa prečiarknuť | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |  | | |  | | |
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| **F.** | | | **Informácia pre žiadateľa** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Úrad práce, sociálnych vecí a rodiny - IČO 30794536 - spracúva Vaše osobné údaje (vrátane osobných údajov spoločne posudzovaných osôb) v zmysle zákona č. 201/2008 Z. z. o náhradnom výživnom v znení neskorších predpisov a uvedené osobné údaje ďalej poskytuje orgánom verejnej moci. V prípade akýchkoľvek nejasností, problémov, otázok, ktoré súvisia s ochranou osobných údajov sa môžete obrátiť na mailovú adresu: **ochranaosobnychudajov@upsvr.gov.sk.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **G.** | | **Vyhlásenie žiadateľa** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Vyhlasujem, že bol | | | | | | | | |  | nebol | | |  | podaný podnet orgánom činným v trestnom konaní na | | | | | | | | | | | | | | | | | | | | | |  |
|  | začatie trestného stíhania povinnej osoby pre zanedbanie povinnej výživy.  Vyhlasujem, že oprávnená osoba sa zdržiava na území Slovenskej republiky.  **Vyhlasujem, že všetky údaje uvedené v žiadosti sú pravdivé a som si vedomý(á) právnych následkov v prípade uvedenia nepravdivých údajov.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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***Poznámka: O podaní podnetu na začatie trestného stíhania je potrebné predložiť doklady pri podávaní žiadosti***

V ........................................... dňa ..............................

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**podpis žiadateľa**

**Správnosť údajov porovnal s dokladom totožnosti č. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dátum porovnania Podpis

**K vyplnenej žiadosti je potrebné predložiť:**

* **Potvrdenie o podaní** návrhu na vykonanie exekúcie na vymoženie pohľadávky na výživnom súdu;
* **Potvrdenie Centra** pre medzinárodnoprávnu ochranu detí a mládeže o postúpení návrhu na výkon rozhodnutia vo veci vymáhania výživného príslušnému prijímajúcemu orgánu v cudzine, alebo potvrdenie, že vymáhanie výživného z cudziny nie je možné;
* **Potvrdenie útvaru sociálneho zabezpečenia** alebo **Vojenského úradu sociálneho zabezpečenia** o výške sirotského výsluhového dôchodku, sirotských výsluhových dôchodkov, alebo potvrdenie o nepriznaní sirotského výsluhového dôchodku;
* **Potvrdenie o návšteve školy**, ak ide o žiaka alebo študenta navštevujúceho školu so sídlom mimo územia Slovenskej republiky;
* **Doklad o úhrade výživného v mesiaci podania žiadosti** (v prípade, ak si povinná osoba čiastočne plní vyživovaciu povinnosť).

**Žiadateľ uvedie nasledovné údaje z posledného rozhodnutia súdu, ktorým súd určil dieťaťu výživné:**

**ECLI kód (uvedený na rozhodnutí súdu): .............................................. ALEBO**

**Spisovú značku rozhodnutia súdu: ...................., Dátum vydania rozhodnutia súdu.....................**

**Názov súdu: ...........................................................................**

***Na základe uvedeného žiadateľ nepredkladá kópiu rozhodnutia súdu.***