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| **Žiadosť o jednorazový príspevok dieťaťu pri zverení do náhradnej starostlivosti** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Údaje v žiadosti vypĺňajte paličkovým písmom a zodpovedajúci údaj označte podľa tohto vzoru | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **A.** | | ***Údaje o dieťati – oprávnená osoba*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Meno | | | | | | | | | | | |  | | Priezvisko | | | | | | | |  | | | Štátna príslušnosť | | | | | | | | | | | | | | | | | | | | | | |
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|  | Dátum narodenia | | | | | | | | | |  | | | | | | | | Rodné číslo |  | |  | | |  | | |  | | |  | |  | | **/** | |  | | |  | |  | |  | |  | | |
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| **B.** | | ***Údaje o náhradnom rodičovi*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Meno | | | | | | | | | | | |  | Priezvisko | | | | | | | | |  | | | Štátna príslušnosť | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Dátum narodenia | | | | | | | |  | | | | | | |  | Rodné číslo | | | |  | | |  | | |  | | |  | |  | |  | | **/** | | |  | |  | |  | |  | |  | |
|  | **Adresa trvalého pobytu v SR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Ulica | | | |  | | | | | | | | | | | | | | | | | | | | | | | | číslo | | | | | | | | |  | | | | | | | | | |  |
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|  | **Príbuzenský vzťah náhradného rodiča k zverenému dieťaťu** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  | Starý rodič | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  | Iný príbuzný | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  | Cudzí | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | **Forma náhradnej starostlivosti** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  | Náhradná osobná starostlivosť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  | Pestúnska starostlivosť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  | Poručníctvo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **C.** | | | ***Spôsob výplaty*** | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Na účet v banke v SR | | | Číslo účtu | | |  | |  | |  | |  |  |  | |  |  |  |  | Kód banky |  |  |  | |  |  | |
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|  | V prípade neuvedenia účtu sa príspevok vyplatí v hotovosti na adresu trvalého pobytu  v  SR/prechodného pobytu v SR\*.  \*nehodiace sa prečiarknuť | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| **D.** | | ***Vyhlásenie žiadateľa*** | | | | | | | | | |
| Vyhlasujem, že všetky údaje uvedené v tejto žiadosti sú pravdivé a som si vedomý/á právnych následkov v prípadeuvedenia nepravdivých údajov. Uvedomujem si, že neprávom prijatú sumu jednorazového príspevku dieťaťu pri zverení do náhradnej starostlivosti som povinný(á) vrátiť.  **Informácia pre žiadateľa**  Úrad práce, sociálnych vecí a rodiny - IČO 30794536 - spracúva Vaše osobné údaje (vrátane osobných údajov spoločne posudzovaných osôb) v zmysle zákona č. 627/2005 Z. z. o príspevkoch na podporu náhradnej starostlivosti o dieťa 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**](mailto:ochranaosobnychudajov@upsvr.gov.sk)**.** | | | | | | | | | | | |
|  | V |  | | dňa |  | | Podpis náhradného rodiča | |  | |  |
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| **E.** | | ***Správnosť údajov porovnal s originálom*** | | | | | | | | | |
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|  | Dátum porovnania | |  | | |  | | | | |  |
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|  | Meno a priezvisko | |  | | | | | Podpis zamestnanca | |  |  |
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|  | **Za účelom porovnania údajov uvedených v žiadosti žiadateľ predloží**   * občiansky preukaz (identifikačnú kartu).   **Žiadateľ uvedie nasledovné údaje z posledného rozhodnutia súdu, ktorým súd rozhodol o zverení dieťaťa** do starostlivosti nahrádzajúcej starostlivosť rodičov:  **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.** | | | | | | | | | |  |