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|  | Žiadosť o príplatok k prídavku na dieťa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | | |  | | |  | |  | | Údaje v žiadosti vypĺňajte paličkovým písmom a zodpovedajúci údaj označte podľa tohto vzoru | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  |  |
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| **A** | | | | Údaje o žiadateľovi o príplatok k prídavku na dieťa 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  |  |
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|  | Priezvisko | | | | | | | | | | | | |  | |  | | |  | |  | |  | | |  | |  | |  | | |  | |  | | |  | | | Meno | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | | Rodinný stav 2) | | | | | | | | | | | | | | | | |  |
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|  | Dátum narodenia | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Rodné číslo (Identifikačné číslo) | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Štátna príslušnosť | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Adresa trvalého pobytu v SR 3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Adresa prechodného pobytu v SR 3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  |  |
|  | Ulica | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | číslo | | | | | | | |  | | | | | | | | | | | | |  |
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|  | PSČ | | | | | | | |  | | | | | | | | | | | | Obec | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tel.číslo | | | | | | | |  | | | | | | | | | | | | |  |
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|  | Prechodný pobyt povolený | | | | | | | | | | | | | | | | | | | | | |  | | |  | | od | | | | |  | | | | | | | | | | | | | | | |  | | | | do | | | |  | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  |  |
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|  | Adresa trvalého pobytu (bydliska) v členskom štáte EÚ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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|  | Štát | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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| **B** | | | | Žiadateľ | | | | | | | | | | | | | | |  | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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|  | 1. | | |  | | | poberá dôchodkovú dávku (dôchodok - starobný, predčasný starobný, invalidný z dôvodu poklesu schopnosti vykonávať zárobkovú činnosť o viac ako 70 %, výsluhový po dovŕšení veku potrebného na nárok na starobný dôchodok, dôchodková dávka toho istého druhu v cudzine) alebo poberá peňažný príspevok na opatrovanie | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 2. | | |  | | | vykonáva zárobkovú činnosť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 3. | | |  | | | nevykonáva zárobkovú činnosť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 4. | | |  | | | má priznaný daňový bonus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 5. | | |  | | | nemá priznaný daňový bonus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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| **C** | | | |  | | |  | | |  | | | |  | | |  | | | |  | | |  | | | |  | | |  | | | |  | | | | |  | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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|  | Uplatňujem si nárok na príplatok k prídavku na dieťa od | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | uveďte dátum | | | | | | | | | | | | | |
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| D | | | | | ***Údaje o ďalšej fyzickej osobe, ktorá si môže uplatniť daňový bonus (druhý rodič, náhradný rodič alebo manžel rodiča, ktorý nie je rodičom nezaopatreného dieťaťa) 4)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Priezvisko | | | | | | | | | | | | |  | |  | | |  | |  | |  | | |  | |  | |  | | |  | |  | | |  | | | Meno | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | | Rodinný stav 2) | | | | | | | | | | | | | | | | |  |
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|  | Dátum narodenia | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Rodné číslo (Identifikačné číslo) | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Štátna príslušnosť | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Adresa trvalého pobytu v SR 3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Adresa prechodného pobytu v SR 3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  |  |
|  | Ulica | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | | |  |
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|  | PSČ | | | | | | | |  | | | | | | | | | | | | Obec | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | | |  |
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|  | | Číselné odkazy sú uvedené na strane 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |  |
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| E | | | ***Fyzická osoba uvedená v časti „D“, ktorá si môže uplatniť daňový bonus*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  |  |
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|  | 1. | |  | | | poberá dôchodkovú dávku (dôchodok starobný, predčasný starobný, invalidný z dôvodu poklesu schopnosti vykonávať zárobkovú činnosť o viac ako 70 %, výsluhový po dovŕšení veku potrebného na nárok na starobný dôchodok, dôchodková dávka toho istého druhu v cudzine) alebo poberá peňažný príspevok na opatrovanie | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 2. | |  | | | vykonáva zárobkovú činnosť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 3. | |  | | | nevykonáva zárobkovú činnosť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 4. | |  | | | má priznaný daňový bonus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 5. | |  | | | nemá priznaný daňový bonus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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| **F.** | | ***Spôsob výplaty 5)*** | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Na účet v banke v SR | | | Číslo účtu | | |  | |  | |  | |  |  |  | |  |  |  |  | Kód banky |  |  |  |  |  |
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|  |  | | 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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Číselné odkazy sú uvedené na strane 3

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| **G** | | Vyhlásenie žiadateľa | | | | | | | | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Vyhlasujem, že sa s nezaopatreným dieťaťom/deťmi nezdržiavame  / zdržiavame  v štáte, ktorý nie je členským štátom Európskej únie, zmluvnou stranou Dohody o Európskom hospodárskom priestore alebo Švajčiarskou konfederáciou a počas pobytu v tomto štáte som povinne verejne zdravotne poistený v Slovenskej republike.  Vyhlasujem, že žiadna iná fyzická osoba si neuplatnila nárok na prídavok na dieťa a na príplatok k prídavku na dieťa, na dieťa/deti uvedené v časti E žiadosti o prídavok na dieťa, že všetky údaje v tejto žiadosti sú pravdivé a každú zmenu, ktorá má vplyv na nárok, na výšku a výplatu príplatku k prídavku na dieťa písomne oznámim do 8 dní úradu práce, sociálnych vecí a rodiny podľa ustanovenia § 14 písmeno b) zákona č. 600/2003 Z. z. o prídavku na dieťa a o zmene a doplnení zákona č. 461/2003 Z. z. o sociálnom poistení v znení neskorších predpisov.  Uvedomujem si, že neprávom prijatú sumu príplatku k prídavku na dieťa 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. 600/2003 Z. z. o prídavku na dieťa a o zmene a doplnení zákona č. 461/2003 Z. z. o sociálnom poistení 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).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Dátum | |  | | | | | | | |  |  |  |  |  |  |  | Podpis žiadateľa | | | | | | | |  | | | | | | | | | | | | | |  |
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| **H** | | ***Správnosť údajov porovnal s originálom*** | | | | | | | | | | | | | | | | |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | Priezvisko | | | | | | |  | | | | | | | | | | |  | | Meno | | | |  | | | | | | | | | | |  |  |  |  |
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|  |  | Dátum porovnania | | | | | | |  | | | | | | | | | | | | Podpis zamestnanca | | | | | | | | |  | | | | | | | | | |  |
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|  | Číselné odkazy k vyplňovaniu žiadosti | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | 1) údaje o oprávnenej osobe, ktorej sa poskytuje prídavok na dieťa alebo ktorá požiadala o prídavok na dieťa a príplatok k prídavku  2) napr.: vydatá / ženatý, slobodná / slobodný, rozvedená / rozvedený, vdova / vdovec   1. príslušný druh pobytu v SR označte podľa vzoru, pričom prechodný pobyt platí len pre cudzincov 2. § 33 ods. 2 zákona č. 595/2003 Z. z. o dani z príjmov v znení neskorších predpisov 3. na účet v banke alebo na účet v pobočke zahraničnej banky na území SR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | **Za účelom porovnania údajov uvedených v žiadosti je žiadateľ povinný predložiť**   * občiansky preukaz (identifikačnú kartu) žiadateľa, príp. cestovný doklad, * cestovný doklad a doklad o povolení na trvalý alebo prechodný pobyt na území Slovenskej republiky žiadateľa – cudzinca, * cestovný doklad a preukaz zahraničného Slováka (zahraničný Slovák).   **Žiadateľ doloží k žiadosti doklady a potvrdenia** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | * posledné rozhodnutie o priznaní dôchodku uvedeného v časti B a E tejto žiadosti, * potvrdenie zdravotnej poisťovne, že rodič dieťaťa alebo osoba, ktorej je nezaopatrené dieťa zverené do starostlivosti nahrádzajúcej starostlivosť rodičov na základe právoplatného rozhodnutia súdu je povinne verejne zdravotne poistený v Slovenskej republike. Toto potvrdenie sa predkladá v prípade, ak sa žiadateľ a nezaopatrené dieťa zdržiavajú v štáte, ktorý nie je členským štátom Európskej únie (časť F). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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