|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | | **Заява на отримання батьківської допомоги** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | | Заповніть заяву друкованими літерами і позначте відповідний пункт за наступним зразком | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | | на дитину віком до 3 років | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | | на дитину з тривалим несприятливим станом здоров'я, віком до 6 років | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | | на дитину, над якою було встановлено опіку, яка замінює батьківське піклування | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | | на дитину віком від 3 до 6 років – через неприйняття до державного дитячого садка;  **у навчальному році: .....................................** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| **A** | | | | | | | | | | | | | | | | | | | ***Відомості про заявника/заявницю*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | | Прізвище | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | Ім'я | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | Сімейний стан 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | Дата народження | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Персональний ідентифікаційний номер (ідентифікаційний номер) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | Громадянство | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | Адреса постійного місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | Адреса тимчасового місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | Вулиця | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер будинку | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | поштовий індекс | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Населений пункт | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Номер телефону | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | Тимчасове перебування дозволено **з** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **по** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | Адреса постійного місця проживання (реєстрації) в країні ЄС | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | Вулиця | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер будинку | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | поштовий індекс | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Населений пункт | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Номер телефону | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | Країна | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | E-mail | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |
| **B** | | | | | | | | | | | | | | | ***Соціальний статус заявника/заявниці*** 3) (*вкажіть у полі відповідну країну, зокрема Словаччину)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 1. | | | | | | | |  | | | | | | | | | працівник | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 2. | | | | | | | |  | | | | | | | | | працівник Міністерства внутрішніх справ Словацької Республіки або Міністерства оборони Словацької Республіки | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 3. | | | | | | | |  | | | | | | | | | самозайнята особа 4) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 4. | | | | | | | |  | | | | | | | | | пенсіонер | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 5. | | | | | | | |  | | | | | | | | | отримувач допомоги по безробіттю | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **з** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 6. | | | | | | | |  | | | | | | | | | безробітний | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **з** | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | 7. | | | | | | | |  | | | | | | | | | Інший наведіть який | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |
| **C** | | | | | | | | | | ***Дані про іншу уповноважену особу*** *(другого з батьків або його/її чоловіка/дружину)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | Прізвище | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Ім'я | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Сімейний стан 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | Дата народження | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Персональний ідентифікаційний номер (ідентифікаційний номер) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Громадянство | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | Адреса постійного місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | Адреса тимчасового місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | Вулиця | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер будинку | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | поштовий індекс | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Населений пункт | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Номер телефону | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | Адреса постійного місця проживання (реєстрації) в країні ЄС | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | Вулиця | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер будинку | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | поштовий індекс | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Населений пункт | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Номер телефону | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | Країна | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | E-mail | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
| **D** | | | | | | | | | | | | | | | | | ***Соціальний статус другого з батьків*** 3) (*будь ласка, вкажіть у полі відповідну країну, зокрема Словаччину)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | 1. | | | | | | |  | | | | | | | | | | | | працівник | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | 2. | | | | | | |  | | | | | | | | | | | | працівник Міністерства внутрішніх справ Словацької Республіки або Міністерства оборони Словацької Республіки | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | 3. | | | | | | |  | | | | | | | | | | | | самозайнята особа 4) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | 4. | | | | | | |  | | | | | | | | | | | | пенсіонер | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | 5. | | | | | | |  | | | | | | | | | | | | отримувач допомоги по безробіттю | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **з** | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | 6. | | | | | | | |  | | | | | | | | | безробітний | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **з** | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | 7. | | | | | | | |  | | | | | | | | | Інший наведіть який | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |
| **E** | | | | | | | | | | | | | | | ***Спорідненість між заявником та дитиною/дітьми, народженими одночасно*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | | батько/мати | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | | особа, якій дитина передається під опіку на підставі судового рішення | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | | чоловік/дружина одного з батьків, який не є біологічним батьком/матір'ю дитини і мешкає разом з батьком/матір'ю дитини в одному домогосподарстві 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
| **F** | | | | | | | | | ***про дитину, щодо якої заявниця/заявник претендує на батьківську допомогу 5****)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | | Прізвище | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | Ім'я | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | | Дата народження | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Персональний ідентифікаційний номер (ідентифікаційний номер) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | Громадянство | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | |
|  | | Адреса постійного місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | Адреса тимчасового місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | |
|  | | Вулиця | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер будинку | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
|  | | поштовий індекс | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Населений пункт | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | Адреса постійного місця проживання (реєстрації) в країні ЄС | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | |
|  | Вулиця | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер будинку | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
|  | поштовий індекс | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Населений пункт | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
|  | Країна | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | **Над дитиною за рішенням суду було встановлено опіку, яка замінює батьківське піклування.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
|  | від | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | номер | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | що набрало законної сили | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |
|  | | Дитина перебуває під наглядом педіатра | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |
|  | | Прізвище | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | Ім'я | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Країна | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | Назва та адреса закладу охорони здоров'я | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | | **Дитина протягом тривалого часу має несприятливий стан здоров'я на підставі висновку від** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **G** | | ***Спосіб оплати*** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | На банківський рахунок, відкритий у банку Словацької Республіки | | | Номер рахунку | | |  | |  | |  | |  |  |  | |  |  |  |  | Код банку |  |  |  |  |  |
|  |  | |  |  |  |  |  |  | |  | |  | | | |  | | | | | | | | | |  |
|  |  | | IBAN | | | |  | | | | | | | | | | | | | | | | | | |  |
|  | Якщо рахунок не вказаний, допомога буде виплачена/виплачуватиметься готівкою за адресою постійного місця проживання  в Словаччині/тимчасового місця проживання в Словаччині\*.  \* зайве перекреслити | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **H** | | ***Декларація заявниці/заявника*** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | , що я та моя дитина/діти, які перебувають на моєму утриманні, не проживаємо проживаємо в країні, яка не є членом Євросоюзу, договірною стороною Угоди про Європейський економічний простір або Швейцарської Конфедерації, і що я маю обов'язкове державне медичне страхування на час мого перебування в Словацькій Республіці.  Повідомляю, що над іншою дитиною, яка народилася до дитини, щодо якої я претендую на отримання батьківської допомоги, було/ не було встановлено опіку, яка замінює батьківське піклування, на підставі судового рішення.  Повідомляю, що дитина не була влаштована до іншого дитячого садка.  У разі прийняття дитини до державного дитячого садка я зобов'язаний повідомити про цей факт відповідно до ст. 9 Закону № 571/2009 Збірки законів «Про батьківську допомогу» протягом 8 днів.  Заявляю, що вся інформація в цій заяві є правдивою та зобов’язуюсь протягом 8 днів у письмовій формі повідомляти платника батьківської допомоги про будь-які зміни, що впливатимуть на моє право на отримання батьківської допомоги, її розмір та виплату (зокрема, про здійснення одним з батьків прибуткової діяльності в державі-члені ЄС) .  **Я усвідомлюю, що зобов'язаний/а повернути неправомірно отриману суму батьківської допомоги.**  Відповідно до ст. 11 Закону № 571/2009 Збірки законів «Про батьківську допомогу та про внесення змін і доповнень до деяких законів» в останній редакції, я дозволятиму платникові батьківської допомоги відвідувати помешкання та надаватиму інформацію й роз’яснення щодо умов отримання допомоги з метою перевірки фактів, викладених у цій заяві, які є визначальними для отримання права на батьківську допомогу, її розміру та виплати.  **Інформація для заявників**  Управління зайнятості, соціальних справ та сім'ї – ідентифікаційний номер 30794536 – опрацьовує Ваші персональні дані (зокрема персональні дані осіб, які оцінюються спільно) відповідно до закону № 571/2009 Збірки законів «Про батьківську допомогу та про внесення змін і доповнень до деяких законів» в останній редакції, і надає вищезазначені персональні дані органам державної влади. У разі виникнення будь-яких неясностей, проблем, питань, пов'язаних із захистом персональних даних, ви можете звернутися до нас за наступною електронною адресою:[**ochranaosobnychudajov@upsvr.gov.sk**](mailto:ochranaosobnychudajov@upsvr.gov.sk)**.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | V |  | | | | | | | | | | | | дата | | |  | | | | | | | |  |  |  |  | Підпис заявника | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | |  | | | | | |  | | | | | |  | | | |  | | | |  | | | | |  | | | |  | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | |
| **CH** | | | | | | | | | | ***Правильність даних співробітник звірив*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | |
|  | |  | | | | | | | |  | | | | | |  | | | | | |  | | | |  | | | |  | | | | |  | | | |  | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | |
|  | |  | | | | |  | | | | | | | з оригіналом | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | | | |  | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | |
|  | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | | |  | | | | | | |  | | | | | | | з доступної інформаційної системи державного управління | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | | | |  | | | | | | |  | | | | | | | |  | | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | будь ласка, вкажіть, з якої | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | |  | | | | | | |  | | | | | | | |  | | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | |
|  | | | | | | | |  | | | | | | | | | | |  | | | | |  | | | |  | | | | |  | | | |  | | | |  | | | | |  | | | | | |  | | | | | | | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | |  | | | | | |  | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | |
|  | | | | | | | | Прізвище | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Ім'я | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | |
|  | | | | | |  | | | | | | |  | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | |  | | | | |  | | | | | |  | | | | | |  | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | | |  | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | | |  | | |
|  | | | | | | Дата звірення | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | | | Підпис працівника | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | | |  | | |
|  | | | | | |  | | | | | | |  | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | |  | | | | |  | | | | | |  | | | | | |  | | | |  | | | | |  | | | | | |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | | |  | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | |  | | | | |  | | | | |  | | | | |  | | | | | | |  | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **I. Числові довідки для заповнення заяви на отримання батьківської допомоги** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | 1. Наприклад: заміжня / одружений, незаміжня / неодружений, розлучена / розлучений, вдова/вдівець.   **Якщо на отримання батьківської допомоги претендує чоловік/дружина небіологічного батька дитини**  **який проживає в домогосподарстві разом з батьком дитини, цей факт підтверджується свідоцтвом про шлюб.**   1. вказати тип проживання в Словацькій Республіці відповідно до шаблону, тоді як тимчасове проживання стосується лише іноземців 2. у таблицях B і D вкажіть соціальні статуси, які застосовуються до вас або до іншої уповноваженої особи; у рядку 4 таблиці B і D вкажіть дату (у форматі день, місяць, рік), з якої ви отримуєте допомогу по безробіттю та від якої країни, у тому числі Словаччину; у рядку 5 таблиці B і D вкажіть дату (у форматі день, місяць, рік), з якої ви є безробітним. 3. наприклад, бізнес у сфері сільськогосподарського виробництва, лісового та водного господарства, торгівлі, бізнес, що здійснюється на підставі ліцензії, відмінної від торгової (згідно із Законом про комерційних юристів, Законом про податкових консультантів, Законом про нотаріат), партнер у публічній компанії, керуючий директор компанії, особа, яка надає особисту допомогу громадянину з важкою формою інвалідності, експерт, перекладач, ... 4. Дані про одночасно народжених дітей, які народилися в порядку другої, третьої, четвертої черговості, заповнюються в окремому розділі F (наприклад, F2 - друга дитина, народжена одночасно, F3 - третя дитина, народжена одночасно). Адресу інших одночасно народжених дітей необхідно заповнювати тільки в тому випадку, якщо вона відрізняється від адреси першої дитини. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | **II. З метою звіряння інформації, вказаної у цій заяві, заявник подає разом із заявою про призначення батьківської допомоги** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | * посвідчення особи (ідентифікаційна картка) заявника * проїзний документ та дозвіл на постійне або тимчасове проживання на території Словацької Республіки заявника — іноземного громадянина | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | **III. До заяви заявник додає документи та довідки** |  |
|  | * свідоцтво про народження дитини/дітей (оригінал та ксерокопію**), тільки якщо дитина народилася за межами Словацької Республіки** і свідоцтво про народження дитини не було видано спеціальним органом РАЦСу, заявник повинен подати офіційний переклад свідоцтва про народження дитини (це не стосується випадків, коли дитина народилися в Чеській Республіці) * довідка про право на допомогу у зв'язку з вагітністю та пологами на дитину, щодо якої заявник претендує на отримання батьківської допомоги, вимагається тільки у випадку, якщо право на допомогу у зв'язку з вагітністю та пологами виникло і її було виплачено за кордоном або якщо допомога у зв'язку з вагітністю та пологами виплачувалася в Словацькій Республіці силовими структурами (Міністерством внутрішніх справ Словацької Республіки або Міністерством оборони Словацької Республіки). У випадку права на допомогу у зв'язку з вагітністю та пологами, яка виплачується в Словацькій Республіці компанією соціального страхування, така довідка не вимагається (управління запитає довідку в компанії соціального страхування в електронному вигляді).   ***Примітка****:*  *У разі надання документа про отримання допомоги у зв'язку з вагітністю та пологами, виданого за кордоном, або подібної допомоги з-за кордону, слід надати його офіційний переклад.* |  |

* довідка від медичної страхової компанії про обов'язкове державне медичне страхування в Словацькій Республіці, якщо заявник та дитина, яка перебуває на його утриманні, проживають у країні, яка не є членом Євросоюзу, учасницею Угоди про Європейський економічний простір або Швейцарської Конфедерації (частина H).
* **Якщо уповноваженою особою є неповнолітня мати і суд прийняв остаточне рішення** про покладення на неї батьківських прав та обов'язків щодо особистого піклування про дитину, **заявник повинен надати наступну інформацію з останнього судового рішення:**

**Код ECLI (наведений на судовому рішенні): .............................................. АБО**

**Номер справи судового рішення: ...................., Дата винесення судового рішення .....................**

**Назва суду: ...........................................................................**

* **Якщо суд ухвалив остаточне рішення щодо встановлення над дитиною** опіки, яка замінює батьківське піклування, або рішення про передачу дитини під опіку одного з батьків, **заявник повинен надати наступну інформацію з останнього судового рішення:**

**Код ECLI (наведений на судовому рішенні): .............................................. АБО**

**Номер справи судового рішення: ...................., Дата винесення судового рішення .....................**

**Назва суду: ...........................................................................**

**На підставі викладеного заявник не подає копію судового рішення.**

* ***для отримання батьківської допомоги на дитину у віці від 3 до 6 років – у зв'язку з неприйняттям до державного дитячого садка:* рішення дитячого садка, створеного місцевою державною адміністрацією у сфері освіти або органом місцевого самоврядування, тобто «державного дитячого садка», про відмову у зарахуванні дитини до закладу на поточний навчальний рік**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **F...** | | ***Дані про одночасно народжену дитину (заповнюються тільки під час подавання заяви на отримання батьківської допомоги на дітей віком до 3 років)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Прізвище | | | |  |  |  |  |  |  |  |  |  |  |  | Ім'я | | |  |  |  |  |  |  |  |  |  |  |  |  | | | | | | | | |  |
|  |  | | | | | | | | | | | | | |  |  | | | | | | | | | | | | |  |  | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Дата народження | | | | | | | | | | |  | Персональний ідентифікаційний номер (ідентифікаційний номер) | | | | | | | | | | | |  | Громадянство | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | |  |  | | | | | | | | | | | |  |  | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
|  | Адреса постійного місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | |  | Адреса тимчасового місця проживання в Словацькій Республіці 2) | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
|  | Вулиця | | |  | | | | | | | | | | | | | | | | | | | | | | | | номер | | | |  | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | поштовий індекс | | |  | | | | | Населений пункт | | |  | | | | | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  | Адреса постійного місця проживання (реєстрації) в країні ЄС | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Вулиця | | |  | | | | | | | | | | | | | | | | | | | | | | | | номер | | | |  | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | поштовий індекс | | |  | | | | | Населений пункт | | |  | | | | | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Країна | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Над дитиною за рішенням компетентного органу було встановлено опіку, яка замінює батьківське піклування** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | від | |  | | | | | | | | номер | | |  | | | | | | | |  | що набрало законної сили | | | | | | | |  | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Дитина перебуває під наглядом педіатра | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Прізвище | | | |  |  |  |  |  |  |  |  |  |  |  | Ім'я | | | |  |  |  |  |  |  |  |  |  |  | Країна | | | | | | | | |  |
|  |  | | | | | | | | | | | | | |  |  | | | | | | | | | | | | |  |  | | | | | | | | |  |
|  | Назва та адреса закладу охорони здоров'я | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Дитина протягом тривалого часу має несприятливий стан здоров'я на підставі висновку від** | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |