

**Application for:**

Issue

or

prolongation of

residence permit

blue card EU

permanent residence EU

right to reside

other

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## 1. Personal information

**Family name:**

\_\_\_\_\_

**Name at birth:**

\_\_\_\_\_

**First name(s):**

\_\_\_\_\_

**Date of birth:**

\_\_\_\_\_

**Place of birth:**

\_\_\_\_\_

**sex:**

female  male

**eye color:**

\_\_\_\_\_

**Height in cm:**

\_\_\_\_\_

**Nationality:**

\_\_\_\_\_

**Marital status:**

single

married since: \_\_\_\_\_

in a registered partnership since: \_\_\_\_\_

separated since: \_\_\_\_\_

divorced since: \_\_\_\_\_

widowed since: \_\_\_\_\_

**Current address (town, street) :** \_\_\_\_\_

**Telephone number +**

**E-Mail address:**

(optional information)

\_\_\_\_\_

## 2. Family members (spouse, life partner)

**Family name:**

\_\_\_\_\_

**Name at birth:**

\_\_\_\_\_

**First name(s):**

\_\_\_\_\_

**Date of birth:**

\_\_\_\_\_

**Place of birth:**

\_\_\_\_\_

**Nationality:**

\_\_\_\_\_

**3. Children of the applicant**

	<b>Family name, first name</b>	<b>Date &amp; place of birth</b>	<b>current address</b>	<b>nationality</b>	<b>sex</b>
1.	_____	_____	_____	_____	f / m
2.	_____	_____	_____	_____	f / m
3.	_____	_____	_____	_____	f / m
4.	_____	_____	_____	_____	f / m
5.	_____	_____	_____	_____	f / m

**4. Parents of the applicant (to be completed only for underage children)**

**Family name:** \_\_\_\_\_  
**Name at birth:** \_\_\_\_\_  
**First name(s):** \_\_\_\_\_

**5. Passport**

**No.:** \_\_\_\_\_  
**Date of issue:** \_\_\_\_\_  
**Issued by:** \_\_\_\_\_  
**Valid until:** \_\_\_\_\_

**6. Entry and advance stays**

Entry on: \_\_\_\_\_

Have you stayed in Germany or the EU before?  yes  no

If yes, state, times and places: from – to: \_\_\_\_\_  
in: \_\_\_\_\_

from – to: \_\_\_\_\_  
in: \_\_\_\_\_

from – to: \_\_\_\_\_  
in: \_\_\_\_\_

Have you ever been expelled or deported from the Federal Republic of Germany or has an application for a residence title been rejected or have you been refused admission to the Federal Republic of Germany?  yes  no

If so, reason: \_\_\_\_\_

**7. Existing resident permit**

Purpose: \_\_\_\_\_

Date of issue: \_\_\_\_\_

Valid until: \_\_\_\_\_

Issued by: \_\_\_\_\_

Intended duration of further stay: \_\_\_\_\_

Employer

(Name of company, address): \_\_\_\_\_

**8. Livelihood and health insurance**

What income do you pay your livelihood with? \_\_\_\_\_

Amount of income: \_\_\_\_\_

Do you or a person entitled to maintenance collect social benefits (e.g. ALGII, social welfare, housing benefits)  yes  no

If so, kind of which social benefit? \_\_\_\_\_

Do you have health insurance for Germany?  yes  no

Insurance company: \_\_\_\_\_

**9. German skills**

**Current level of German**

(please enclose certificate):

A1

A2

B1

**Name of the school:**

\_\_\_\_\_

**10. Public safety and order**

**Have you been previously convicted for a criminal offense / are you currently in a current criminal proceeding?**

yes

no

**If so, where?**

\_\_\_\_\_

**Convicted before which court?**

\_\_\_\_\_

**Reason for conviction:**

\_\_\_\_\_

**Type of punishment and sentence:**

\_\_\_\_\_

\_\_\_\_\_

**place, date**

\_\_\_\_\_

**signature of the applicant**