

EUTR1

Application for a Residence Card for a qualifying family member of a European Union national

Who is this form for?

Please read the information below carefully before you submit your application. If you do not submit sufficient information and/or evidence to show you qualify for a residence card your application may be refused.

You should use this application form if:

- You are a non-EEA national resident in Ireland who is a qualifying family member of an EEA national
- · The EEA national is residing in Ireland
- The EEA national is exercising their EU Treaty Rights in the State (employed, selfemployed, residing with sufficient resources, studying or involuntarily unemployed)

Which qualifying family members can apply on this form?

If the EEA national is residing in Ireland as a student you must be the:

- Spouse or recognised civil partner of the EEA national, or
- Dependent child of the EEA national or of their spouse/recognised civil partner

In all other cases, you must be the:

- Spouse or recognised civil partner of the EEA national, or
- Child or grandchild of the EEA national, or of their spouse/recognised civil partner, and be aged <u>under 21</u> or dependent, or
- Dependent parent or grandparent of the EEA national or of their spouse/recognised civil partner.

If you are a family member of an EEA national but do not fall within the criteria listed above, you should apply on Form EU1A

How to complete this form:

- You must complete a separate application for each non-EEA family member, including each child under 18 years of age.
- You must complete this form in CAPITAL letters
- You must place a tick (✓) in the boxes that are relevant to you
- You must complete all sections of this form which are relevant to you in full

- You must submit photocopies of supporting documents for each application
- You must complete the checklists on pages 20, 21 and 39 for each application
- You, the applicant, must sign and date the declaration on page 22
- The EEA national must sign and date the declaration on page 40
- If you or the EEA national are unable to provide any of the information requested at this time, please explain the reason in writing and enclose with this application.
- You must send your completed application form and any supporting documents you wish to provide to the address below

EU Treaty Rights Division Irish Naturalisation and Immigration Service 13/14 Burgh Quay, Dublin 2, D02 XK70

- Your application may be delayed if you do not send it to the address listed above
- We recommend you send your application by registered post
- If you choose to send your application by registered post you can track it on the An Post website, www.anpost.ie

Warning:

If you have a change in circumstances while your application is being processed, for example:

- If you change your personal details (your name etc.)
- If your contact details change (your address or representative etc.)
- If there is a change in other circumstances (your EEA national family member leaves Ireland etc.)

you must inform EU Treaty Rights Division office <u>immediately</u> and provide any relevant supporting documentation.

Data privacy notice

- 1. The data you provide in this form is collected by the Irish Naturalisation and Immigration Service (INIS), a part of the Department of Justice and Equality. The data controller for the information you provide is the Department of Justice and Equality. The data controller's contact details are: EU Treaty Rights Division, Irish Naturalisation and Immigration Service, Department of Justice and Equality, 13 14 Burgh Quay, Dublin 2, D02 XK70.
- 2. You can contact the Data Protection Officer for the Department of Justice by writing to: The Data Protection Officer, Department of Justice and Equality, 51 St. Stephen's Green, Dublin 2, D02 HK52. Or by email: dataprotectioncompliance@justice.ie
- We will use the personal data you provide in this form for the purpose of assessing your entitlement to reside in the State as the family member of the EEA national named in your application
- 4. We collect and process this data in order to comply with our legal obligations or to perform tasks in the public interest. The specific basis for collecting and processing this data is as follows:
 - Directive 2004/38/EC
 - Regulation 26 of the EC (Free Movement of Persons) Regulations 2015
 - Section 8 of the Immigration Act, 2003
 - The Immigration Act 2004
 - The Immigration Act 2003
 - The Immigration Act 1999
- 5. The personal data provided here will be stored securely in INIS's databases. It may be shared, if necessary, with the following third parties:
 - · Government departments and agencies,
 - An Garda Siochána
 - EEA competent authorities
 - EEA police forces
 - Individuals with your consent, for example, employer, landlord
 - Service providers of the Department of Justice and Equality, for example data handling and storage providers, producer of Residence Card/Irish Residence Permit.
- 6. The personal data you provide in this form is necessary for us to determine if you meet the criteria for a residence card as the family member of the EEA national named by you. If this data is not provided, your application cannot be processed.

- 7. This data may be retained until INIS can be sure that neither party will have any further contact with the immigration services. This is an indeterminate period as your immigration history in the State may span a full lifetime.
- 8. Both you and the EEA national have the right to request access to, and a copy of any personal data pertaining to you or them that we process. You can do this by filling in a Subject Access Request form, available at http://www.justice.ie/en/JELR/Pages/Data Protection, and sending it to subjectaccessrequests@justice.ie. You may be required to verify your identity before we send the information to you.
- 9. You or the EEA national have the right to request us to rectify any errors in your data or to erase your data, as well as to seek a restriction of the processing of your data or to object to the processing of your data in certain circumstances. To do this you or the EEA national should write to EU Treaty Rights Division, Irish Naturalisation and Immigration Service, the Department of Justice and Equality, 13 14 Burgh Quay, Dublin 2, D02 XK70 explaining what errors need to be rectified or erased or your reasons for seeking the restriction of, or objecting to, the processing.
- 10. You or the EEA national have a right to lodge a complaint with the Data Protection Commission if you believe your personal data is being processed by us unlawfully. Information about how to make a complaint can be found on www.dataprotection.ie.

I acknowledge that I have read and understood the information outlined above, which relates to my data protection rights.

Name		
Signature (Applicant)	Date	
Name of Parent/Guardian if applicant is under 18		
Signature of Parent/Guardian		Date
Signature (EEA national)	_ Date	

Se	ecti	on	1				Αp	pli	car	ıt's	pe	rso	nal	de	tail	s								
1.1	Sur	nam	ne/F	amil	ly na	ame	(as	sho	wn	in pa	assr	oort)												
1 2	For	enai	me(s) (s	as sł	10WI	n in	nas	sno	rt)														
								Pas																
1.3		er n			(ma	ider	n na	me,	nan	ne a	ıt bir	th, a	any	othe	er na	imes	s) by	y wh	nich	you	are	e or	have	9
		III KI																						
1.4	If yo	ou h	ave	bee	n kr	nowi	n by	any	/ oth	ner r	nam	e(s)	, wh	at d	ates	s did	you	ı us	e th	is/th	ese	e na	mes	?
1.5	If yo	ou c	han	ged	you	r na	me,	wh	y dic	d yo	u ch	ang	e it?) (~)									
	Ma	rriag	je/ci	vil p	artn	ersh	nip		Div	orce)				Othe	er								
If "c	the	r" pl	eas	e ex	plaiı	n																		
1.6	Dat	e of	birt	h	,					1.7	'Ge	nde	r (✓)										
D	D]/[M	M	/ <u>Y</u>	Y	Y	Y	7		Ma	le] Fe	mal	е			Ot	her		
1.8	Wh	at is	you	ır re	latio	nsh	ip st	tatus	s? (√)														
	Sin	gle				Mar	ried					cogr I pa				Div	vorc	ed			Wie	dow	ed	
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1 0	Not	iona	ditv																					
1.9	INAL	iona	liity																			T	T	
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1.10) Pla	ace	and	cou	ıntry	of I	oirth																	

.11a Do you hold, or have you ever h	eld any oth	er Natio	nality or	Citizen	ship? (√)	
Yes (tick relevant box and give	details)			No			
Citizenship							
Nationality							
.11b If you have ticked one of the ab	ovo bovos	nloaso (rivo data	se vou b	old this		
Citizenship/nationality	ove boxes,	picase (give date	ss you n	ieia tilis	•	
D D / M M / Y Y Y	то		D	D / N	1 M /	/ Y Y	YY
.11c Details of the citizenship/national	ality which y	ou have	indicate	ed abov	е		
·							
.12 Current home address in Ireland							
112 Current nome address in freiand							
.13 How many family members reside	e with you?						
.14 Address Eircode	1.15 Conta	ct teleph	none nui	mber of	applica	ant	
		<u> </u>					T
.16 Email address		<u> </u>	T I		Π	T	
.17a PPS number (if you have one)			old Depa				rence
Trail Silumber (ii you have one)	1		umber (if you ha	ave one	e)	/
]	6 9				/	/
.17b Date PPS number was issued	1.19 F	Passport	numbei	ſ			
D D / M M / Y Y Y							
.20 INIS Person ID number (if you ha	ave one)						

Section 1B

Immigration history of applicant

Airport	1.21 What date did you mo	ove to Ireland?			
1.24 Where did you arrive in Ireland? (For example, Dublin Airport, Rosslare, Shannon etc.) 1.25 What was your status on arrival in Ireland (✓) Asylum-seeker Family member of Employment permit or green Card permit Student Visitor Entry without permission Other (please give details): 1.26 Have you previously applied for permission to visit or reside in Ireland or another EU Member State? (✓) If yes, you should provide evidence of entry and exit as applicable. Yes (give details below) No Type of permission/visa Country applied to Result of application permission/visa 1.27 How long do you intend on staying in Ireland? (for example permanently, for the duration	1.22 GNIB ID (if you have o	one)			
1.24 Where did you arrive in Ireland? (For example, Dublin Airport, Rosslare, Shannon etc.) 1.25 What was your status on arrival in Ireland (✓) Asylum-seeker Family member of Employment permit or green Card permit Student Visitor Entry without permission Other (please give details): 1.26 Have you previously applied for permission to visit or reside in Ireland or another EU Member State? (✓) If yes, you should provide evidence of entry and exit as applicable. Yes (give details below) No Type of permission/visa Country applied to Result of application permission/visa 1.27 How long do you intend on staying in Ireland? (for example permanently, for the duration	1.23 How did you enter Irel	land? (✓)			
Asylum-seeker	Airport	Seaport		Land Border	
Student	1.24 Where did you arrive i	in Ireland? (For e	xample, Dubli	n Airport, Rosslar	e, Shannon etc.)
Student	1.25 What was your status	on arrival in Irela	nd (√)		
Other (please give details): 1.26 Have you previously applied for permission to visit or reside in Ireland or another EU Member State? (✓) If yes, you should provide evidence of entry and exit as applicable. Yes (give details below) No Type of permission/visa applied for Country applied to Result of application permission/visa Country applied to application permission/visa	Asylum-seeker				nit or green Card
1.26 Have you previously applied for permission to visit or reside in Ireland or another EU Member State? (✓) If yes, you should provide evidence of entry and exit as applicable. Yes (give details below) No Type of permission/visa applied for Country applied to Result of application permission/visa Country applied to Puration of application permission/visa	Student	Visitor		Entry without perr	mission
Member State? (✓) If yes, you should provide evidence of entry and exit as applicable. Yes (give details below) □ No Type of permission/visa applied for Country applied to application Duration of permission/visa 1.27 How long do you intend on staying in Ireland? (for example permanently, for the duration	, ,				
Type of permission/visa applied for Country applied to Result of application permission/visa 1.27 How long do you intend on staying in Ireland? (for example permanently, for the duration	Member State? (✓) If	f yes, you should			
applied for Country applied to application permission/visa 1.27 How long do you intend on staying in Ireland? (for example permanently, for the duration	Yes (give details below	/)			
		Country	applied to		
					tly, for the duration

1.28 Do you hold or have you pre Member State? (✓)	viously held, a residence card issued by Ireland or another EU
Yes (give details below)	☐ No
 1.29 Have you previously been re (✓) 	fused a residence card by Ireland or another EU Member State?
Yes (give details below)	☐ No

Section 1C

Applicant's relationship to EEA national

1.30 This section looks for how are you related to the EEA national. Please tick relevant box and fill out the corresponding subsection on this form (✓)
Chause Complete authoration (i)
Spouse - Complete subsection (i)
Recognised Civil Partner – Complete subsection (i)
Child aged under 21 of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (ii)
Grandchild aged under 21 of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (ii)
Dependent child aged 21 or over of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (ii)
Dependent parent of the EEA national or their spouse or Recognised Civil Partner – Complete subsection (ii)
Dependent grandchild aged 21 or over of the EEA national or of the EEA national's spouse or Recognised Civil Partner – Complete subsection (ii)
Dependent grandparent of the EEA national or of the EEA national's Spouse or Recognised Civil Partner – Complete subsection (ii)
Subsection (i) Please complete this section if you are the spouse or recognised civil partner of the EEA national
1.31 When did you meet the EEA national?
M M / Y Y Y
1.20 M/h and did way first read the FFA rectional?
1.32 Where did you first meet the EEA national?

1.33 When did your relationship begin?		
1.34 Are you related to the EEA national outside your m	arriage or civil partners	ship? (✓)
Yes (give details below) No		
1.35 Do you and the EEA national currently live togethe	(2 (./)	
	· (*)	
Yes No		
1.36 If no, have you ever lived together in Ireland or any	other country? (✓)	
Yes No		
1.37 When and where did you start living together?		
, 5		
1.38 Please provide all addresses where you and the El	EA national have lived	together
Address	Date from	Date to
	5	

1.39 When did you decide to marry or form a Recognised Civil Partnership with the EEA national?
1.40 Date of marriage or civil partnership? D D / M M / Y Y Y Y
1.41 Please tick which type of marriage or partnership applies to your relationship with the EEA national (If other give details) (✓)
Recognised Civil Registered Religious/Traditional Proxy
Other (please give details):
1.42 What is the address where your marriage or civil partnership took place?
1.43a Were both you and the EEA national present at the ceremony? (✓)
☐ Yes ☐ No
1.43b If no, please explain where you and the EEA national were at the time of the ceremony.
4.44 Have you proviously submitted a nation of intention to marry to a Degistrar in Iroland? (./)
1.44 Have you previously submitted a notice of intention to marry to a Registrar in Ireland? (✓)
Yes (give date below) No
D D / M M / Y Y Y

1.45 Has there been an objection to your intention to marry in Ireland? (✓)
Yes (give date below) No
D D / M M / Y Y Y Y
1.46 Have you previously applied to marry in another country? (✓) If yes, please give the country and the date
☐ Yes ☐ No
C O U N T R Y D D / M M / Y Y Y
1.47 Have you previously been refused permission to marry, or had an objection raised against your intention to marry in a country other than Ireland? (✓)
☐ Yes ☐ No
If you answered 'Yes', please provide details here:
1.48 Have you ever been considered to be party to a marriage of convenience by a competent
authority in a country other than Ireland? (✓)
authority in a country other than Ireland? (✓) ☐ Yes ☐ No
authority in a country other than Ireland? (✓)
authority in a country other than Ireland? (✓) ☐ Yes ☐ No
authority in a country other than Ireland? (✓) ☐ Yes ☐ No
authority in a country other than Ireland? (✓) ☐ Yes ☐ No
authority in a country other than Ireland? (✓) ☐ Yes ☐ No
authority in a country other than Ireland? (✓) ☐ Yes ☐ No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any
authority in a country other than Ireland? (✓) Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any details of the decision
authority in a country other than Ireland? (✓) Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any details of the decision
authority in a country other than Ireland? (✓) Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any details of the decision
authority in a country other than Ireland? (✓) Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any details of the decision COUNTRY DD/MM/YYYYY 1.50 Do you or the EEA national currently have another spouse or civil partner, or an unmarried
authority in a country other than Ireland? (✓) Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any details of the decision DD / MM / Y Y Y Y 1.50 Do you or the EEA national currently have another spouse or civil partner, or an unmarried partner, with whom either of you are in a durable relationship? (✓)
authority in a country other than Ireland? (✓) Yes No If you answered 'Yes', please provide details here: 1.49 If you answered 'Yes's to the last question, please provide the country, date and any details of the decision DD / MM / Y Y Y Y 1.50 Do you or the EEA national currently have another spouse or civil partner, or an unmarried partner, with whom either of you are in a durable relationship? (✓)

1.51a Have you or the EEA nati	onal been married or in a civil pa	rtnership before? (✓)
Yes (if yes give date below	w) No	
1.51b Date of divorce, annulme	nt or dissolution	
1.52 Do you and the EEA nation	nal have any children together? (✓)
Yes	No	
1.53 Do you have any children of example from a previous re	of whom the EEA national is not elationship)? (✓)	the biological parent (for
Yes	No	
Subsection (ii) - the dep	complete if you are: endent child of the EEA nation hild, parent or grandparent of t spouse or civil partner of the E	the EEA national
	lependent on the EEA national?	
1.55 Does the EEA national reg	ularly give you money? (✓)	
Yes (give details below)	□ No	
Method of payment (for example cash, EFT)	How much you receive	How often you receive it
1.56 Do you receive financial as	ssistance from any other relative,	friend or any other source? (✓)
Yes (give details below)	☐ No	
Source of income	How much you receive	How often you receive it

1.57 Do you and	d the EEA national cur	rently live together	? (✓)	
Yes	☐ No			
1.58 If no, have	you ever lived togethe	er in Ireland or any	other country? (✓)	
Yes	☐ No			
1.59 When and	where did you start livi	ing together?		
1.60 Please pro	vide all addresses whe	ere you and the EE	EA national lived toge	ether.
	Address		Date from	Date to
4 C4 D				
1.61 Do you pa	y any rent, mortgage o	r otner payment to	or your accommodati	on ? (*)
Yes (give de	etails below)	No		
Expenditure	Amou	nt	Who pays(for exar	nple you, relative)
Rent/Mortgage				
Gas				
Electricity				
Phone				
Food				
Clothing				
Medical Care				
Other				

Please provide any other relevant information about how you are dependent on or receive support from the EEA national

Section 2

Applicant's personal history

- This section asks about any criminal convictions you have.
- This section asks about any involvement you may have had in war crimes, genocide, crimes against humanity or terrorism.
- Please note, if you have received more than 3 charges/indictments/convictions, please photocopy the relevant sections and enclose those completed sections with this form
- If you fail to answer all of these questions as fully and accurately as possible, your application for a residence card may be refused

Warning

It is an offence under Regulation 30 of the European Communities (Free Movement of Persons) Regulations 2015 to make a statement that you know to be false or misleading.

2.1 Have you ever been charged o have not been tried in court? (*	r indicted in any country with a criminal offence for which you
Yes (give details below)	No
Charge/Indictment No. 1	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Charge/Indictment No. 2	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Charge/Indictment No. 3	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	

	ed of an offence in Ireland or abroad? (\checkmark) If yes, please provide on, starting with the most recent one.
Yes (give details below)	No
Criminal conviction 1	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
Criminal conviction 2	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
Criminal conviction 3	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
	ver been required to comply with conditions following release from probation or restricted licence) (\checkmark)
Yes (give details below)	No
Type of condition imposed	
Date condition started	
Term of condition (date of expiry)	
2.2c Did you comply, or are you	in compliance with the imposed conditions or restrictions? (✓)
Yes	No

2.3 Have you ever been a member of, or given support to, an organisation, which has been linked with terrorism? (✓)
Yes (give details below) No
2.4 Have you, in either peace time or war time, ever been involved in, or been suspected of being involved in, war crimes, crimes against humanity or genocide? (✓)
Yes (give details below) No
2.5 Have you ever been involved in, supported, or encouraged terrorist activities in any country? (✓)
Yes (give details below) No
2.6 Have you ever served in a military force or State-sponsored private militia, undertaken any military or paramilitary training, or been trained in the use of weapons and/or explosives? (✓)
Yes (give details below) No

2.7 Have you ever been	deported/removed from	Ireland or another coun	try? (✓)
Yes (give details b	elow) No		
Date of deportation/removal Country			
deported/removed from Country deported/removed to			
2.8 Are you, or have you Ireland or any other		deportation, exclusion of	or removal order in
Yes (give details bel	ow) No		
Type of order			
Date of order			
Status of order			
2.9 Have you ever been	denied permission to er	nter or remain in any oth	er country? (✓)
Yes (give details bel	ow) No		
Type of permission denied			
Name of country			
2.10 Provide details of a photocopy this sect	ll countries you have vis ion and submit with this		If necessary,
Country	Date of travel	Reason for visit	Length of stay

Section 3

Applicant's document and evidence checklist

- Please complete this checklist to show what documents you are providing with your application
- If you do not submit evidence to show that you qualify for a residence card, your application may be refused
- If you wish to send any documents that are not in English, you must get the document translated by a qualified professional translator. The translator must confirm in writing on the translation:
 - ✓ that the translation is a true and accurate translation of the original document
 - ✓ the date of the translation
 - ✓ the full name and contact details of the translator or representative of the translation company
- INIS will not provide written correspondence acknowledging each document you submit with this application

	Description	Tick if you have submitted	Number of pages	For official use
	Identity documents			
1.	Passport of the applicant			
2.	Passport/National Identity Card of the EEA national			
3.	2 passport photos for both the applicant and the EEA national			
	Residency documents if renting			
4.	Tenancy Agreement			
5.	Letter from landlord/letting agent including contact details			
6.	Letter from local authority/County Council			
7.	Utility bills in your name and the EEA national's name			
8.	Bank statements			
9.	Evidence of rent payments			
	Residency documents if a home owner			
10.	Title or Deeds as applicable			
11.	Letter from Mortgage Provider/Local authority/County Council			
12.	Utility bills in your name and the EEA national's name			
	Residency documents if living with a home owner			
13.	Evidence of home ownership, e.g. title deeds/letter from mortgage provider			
14.	Utility bills in the home owner's name			

15.	Letter from the home owner confirming your and the EEA national's residency there		
	Residency documents if you are living with a tenant		
16.	Tenancy agreement in their name		
17.	Letter from the tenant confirming the residence of you and the EEA national including contact details		
18.	Letter from landlord confirming the residence of you and the EEA national including contact details		
19.	Utility bills in the tenant's name.		
	Evidence of relationship		
20.	Civil marriage certificate		
21.	Recognised civil partnership certificate		
22.	Birth certificate		
23.	Evidence of guardianship/custody papers/ adoption papers		
24.	Copy of any previously held residency card		
	Any other documents you have submitted in this application		
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			

Applicant's declaration

You (the applicant) must read the declaration below and sign it. It must be signed by you and not by a representative or other person acting on your behalf. If you are under 18, your parent or guardian may sign it.

Warning: If you do not submit a signed declaration your form will be returned to you.

I hereby apply for a residence card for myself. The information I have given is complete and is true to the best of my knowledge. I also declare that the photographs submitted with this form are a true likeness of me. I confirm that if, before my application is decided, there is a material change in my circumstances or new information relevant to this application becomes available, I will inform the EU Treaty Rights Division of the Department of Justice and Equality in writing immediately. I understand that any false or misleading information or fraudulent supporting documentation submitted will result in the refusal of this application.

I acknowledge that the EU Treaty Rights Division may make enquiries to confirm any of the details or documents provided by me in this application, including my participation in an interview process.

I am aware that a person who asserts an entitlement to any rights on the basis of information which he or she knows to be false or misleading in a material particular shall be guilty of an offence and shall be liable on summary conviction to a fine not exceeding €5,000 or to a term of imprisonment not exceeding 12 months, or both.

Name of applicant (BLOCK CAPITALS	S)													
Date Signed by applicant														
DD/MM/YYYY														
Name of parent/guardian of applicant if aged under 18 (BLOCK CAPITALS)														
		1	1 1		<u>, </u>									
Date														
D D / M M / Y Y Y														
Signed by parent/guardian of applica	nt if aged u	ınder 18												
			7											

Se	Section 5 EEA national's details 5.1 Surname / family name (as in passport)																							
5.1	Surr	nam	e/f	ami	ly na	ame	(as	in p	oass	por	t)													
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5.4	5.4 Dates during which you have used this/these names																							
5.5	Rea	son	for	nan	ne c	han	ge (if ap	plic	able)) (✓	()												
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lf "c	other	." pl€	ase	ex	plair	า																		
5.6	Date	e of	birth	า						5.7	7 Ge	ende	r (✓	()										
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5.10) Pla	ace	and	cou	ıntry	of l	oirth																	
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Section 5B

Immigration history of the EEA national

5.18 What date did you move to Ireland?
D D / M M / Y Y Y
5.19 How did you enter Ireland? (✓)
Airport Seaport Land border
5.20 Where did you arrive in Ireland? (For example, Dublin Airport, Rosslare, Shannon etc.)
5.21 Have you previously resided in Ireland? (✓) If yes give details and dates
Yes (give details below) No
5.22 How long do you intend to stay in Ireland?

Section 5C EEA national's current activity in Ireland

This section asks for details on your current activity in Ireland. The section is divided into five parts. Please only complete the section which is relevant to you, (for example if you are

employed, y	you should complete Section A.
5.23 Pleas	se indicate the type of activity (🗸)
	Employment – Complete Section A Self-employment – Complete Section B Study – Complete Section C Involuntary Unemployment – Complete Section D Sufficient Resources – Complete Section E
Section	A For an EEA national who is in employment
submit a ful	his section if you are currently working for an employer. Please note, you must also lly completed Employer Declaration in addition to the required employment with this application. This declaration is set out in Appendix 'A' of this application.

documents with this application. This declaration is set out in Appendix 'A' of this application form.

5.2	4 Na	ame	of e	mpl	oyeı	٢														
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5.2	5 Co	onta	ct na	ame																
5.2	6 Er	mail	add	ress	of e	emp	loye	r												
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5.2	9 W	orkp	olace	e Eir	rcod	е														
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Section B For an EEA national who is self-employed

Complete this section if you are a self-employed EEA national

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5.3	3 C	lass	of s	elf-e	mpl	oym	ent	(√) .	. If o	othe	r, gi	ve c	deta	ils								
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	C	Other	:																			
5.3 ⁴	4 Ty	уре с	of bu	ısine	ess ((e.g.	ser	vice	es of	fere	d, p	rodi	ucts	ma	de/s	old))					
5.3	5 A	ddre	ss o	f bu	sine	SS																
5.3	6 H	ow d	lo yc	ou, tl	he E	EA	nati	ona	l, ac	lvert	ise	the	bus	ines	s?							
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5.3		onta	ct te	lepr	ione	nui	nbe	r or	bus	ines	ss											
5.3	B E	mail	add	ress	of t	ousii	ness	3														
5.3	9 W	ebsi	te a	ddre	ess f	or th	ne b	usin	ess	if a	pplic	abl	е									

5.40 Date business started trading	5.41 Number of employees
5.42 Date you registered with Revenue for self-assessment	
5.43 Has a P35 return been made for the business? (✓)	
Yes No	
5.44 Date on which tax returns are due	5.45 De DDCIO (()
	5.45 Do you pay PRSI? (✓)
	Yes No
5.46 Is the business registered for VAT? (✓)	
Yes No	
5.47 Name of accountant/tax advisor if applicable	
5.48a Are you a director of the company in which you are se	elf-employed? (✓)
☐ Yes ☐ No	
5.48b If yes, do you pay PAYE returns? (✓)	
Yes No	
5.49 What is your role in the business	
5.50 Monthly operating costs	5.51 Monthly net income
€	€
5.52 Hours worked monthly	
Old Flodis Worked Hollany	

Section C

For an EEA national who is studying

Complete this section if you are undertaking a course of study which is on the interim list of eligible programmes (ILEP)

5.5	3 Na	ame	of c	olle	ge/i	nstit	utio	n																
5.54	4 Nia		of 6																					
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5.5	5 Qu	ualifi	icati	on																				
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5.6°	1 W	hen	did	you	r co	urse	be(gin?				5.	62 \	Nhe	n w	ill yc	our c	our	se e	nd?				
D	D	/[М	M	/ _Y	Y	Y	Y	7) [5 /	M	M]/[Y	Y	Y	Υ			

5.63 Intended activity on cor	mpletion of course	
savings, scholarship, bursar	y, income from relative/friend, in	unemployment/social assistance, come from employment/self-nd how often (e.g. weekly, monthly,
Source of income	How much you receive	How often do you receive it?
5.65 Name of the person(s)	providing financial support	
5.66 Method of payment (i.e	. cash, bank transfer etc.)	
5.67 Do you have comprehe residing with you in Irel		for yourself and your dependents
Yes (give details below)	No	

Section D

For an EEA national who is involuntarily unemployed

If you are temporarily unable to pursue work, please give details below

5.6	8 Na	me	of n	nost	rec	ent	emp	oloye	er															
5.6	9 Ac	ldre	ss o	f ma	ost r	ecei	nt ei	mpla	over															
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5.7	0 Co	nta	ct te	lepr	none	e tor	mo	st re	cen	t en	nplo	yer												
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		l' L																						
5.7	3 W	hy d	lid th	nis e	empl	loym	nent	enc	l?															
C	4 Ar f Em DEA	plo	yme	nt a							ent		5.7			ou in P? (eipt	of a	any p	oayr	nen	t froi	m
	Y	es			N	0								Y	es			N	0					
5.7	6 If y	ou a	are	in re	eceip	ot of	any	/ pa	/me	nts	fron	n DE	EAS	P, p	leas	se p	rovi	de d	etail	ls be	elow	-		
	Ту	ре с	of pa	aym	ent			Da	ate j	oay	mer	nts s	star	ted		Α	moı	unt y	you	rec	eive	(w	eekl	y)

Section E For an EEA national who is residing with sufficient resources

Complete this section if you are residing in the State with enough financial resources available so as not to become a financial burden on the State.

5.77 Date EEA national first the State with sufficient			
D D / M M / Y Y	YY		
5.78 Source of income (✓)	If other, give deta	ils	
Pension Stock Other:	ks/Shares etc.	Thir	d party funds
5.79 Are you receiving any	State funds from t	his or any other	State? (✓)
Yes (give details below)	No No		
5.80 Name of person who could to you and their current			e EEA national, their relationship
5.81 Amount of funds availa	able		
€			
5.82 If funds are from a third	d party, please pro	vide details belo)W
Method of payment	Regularity of	payments	Amount you receive

5.83 Monthly liv	ing expenses	for you and your dependants
Expenditure		Amount
Rent/Mortgage		
Gas		
Electricity		
Phone		
Food		
Clothing		
Medical Care		
Other		
residing wi	ve comprehen th you in Irelai etails below)	sive private medical insurance for yourself and your dependents nd? (✓)
Insurance provide	er	
Name of plan and	I policy number	
When did the plar	n commence?	
Evidence of paym		

EEA national's personal history

- This section asks about any criminal convictions you have.
- This section asks about any involvement you may have had in war crimes, genocide, crimes against humanity or terrorism.
- Please note, if you have received more than 3 charges/indictments/convictions, please photocopy the relevant sections and enclose the completed sections with this form
- If you fail to answer all of these questions as fully and accurately as possible, your application for a residence card may be refused

	licted in any country with a criminal offence for which you a have received more than 3 charges/indictments, please ompleted section with this form
Yes (give details below)	No
Charge/Indictment No. 1	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Date of trial	
Charge/Indictment No. 2	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Date of trial	
Charge/Indictment No. 3	
Name under which you were charged/indicted	
Country where you were charged/indicted	
Type of offence	
Date of trial	

provide details for EACH criminal co	of an offence in Ireland or abroad? (✓) If yes, please nviction, starting with the most recent one. If you have ctions, please photocopy this page and enclose the
Yes (give details below)	☐ No
Criminal conviction 1	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
Criminal conviction 2	
Name under which you were convicted	
Country where you were convicted	
Type of offence	
Sentence given	
Date sentenced	
Term of imprisonment, if any, in months	
from prison? (for example a period of	been required to comply with conditions following release of probation or restricted licence)(✓)
, _	
Type of condition imposed	
Date condition started	
Term of condition (date of expiry)	
6.2c Did you comply, or are you in (✓)	compliance with the imposed conditions or restrictions?
Yes	No

6.3 Have you, in either peace involvement in, war crime			er been involved in, or been suspected of manity or genocide? (✓)
Yes (give details below	v)	No	
6.4 Have you ever been invocuntry? (✓)	olved in, supp	orted, or	encouraged terrorist activities in any
Yes (give details below	/)	No	
6.5 Have you ever been a m associated with terrorism		given su	pport to an organisation, which has been
Yes (give details below	v)	No	
	aining or bee		ate-sponsored private militia, undergone any in the use of weapons and/or explosives? (✓)
Tes (give details below	<u>'') </u>		
6.7 Have you ever been den	ortod/romov	ad from l	caland or another country? (.()
			reland or another country? (✓)
Yes (give details below)	No	
Date of deportation/removal			
Country deported/removed from			
Country deported/removed to			

Ireland or any other	country? (✓)	·	or removal order in
Yes (give details bel	ow) No		
Гуре of order			
Date of order			
Status of order			
6.9 Have you ever been	denied permission to	enter or remain in any oth	ner country? (✓)
Yes (give details bel	ow) No		
Гуре of permission denied			
Name of country			
Date of denial of permission	on		
Country	Date of travel	Reason for visit	Length of stay
	-	-	Length of stay
	es, please provide na	l or any other country of w mes, dates of birth and cu	

EEA national's document and evidence checklist

	Evidence of the EEA national's current activity in the State	Tick if you have submitted (✓)	Number of pages	For official use
	If the EEA national is in employment			
1.	Declaration signed and stamped by employer (appendix 1)			
2.	Signed and dated contract of employment			
3.	2 recent payslips			
4.	Most recent P60 certificate or amended tax credit certificate			
5.	Corresponding bank statements to show earnings			
	If the EEA national is self-employed			
6.	Agreed tax assessment from Revenue for last financial year			
7.	Letter of registration for self-assessment of income tax (Revenue)			
8.	Certificate from Companies Registration Office			
9.	Sales/Service invoices for the last 6 months			
10.	Corresponding bank statements for the business for the last 6 months			
	If the EEA national is studying			
11.	Letter from course provider, including course description, start date and end date			
12.	Letter from private medical insurance provider for EEA national and dependents			
13.	Copy of private health insurance policy			
14.	Evidence of payment of private health insurance policy			
15.	If the EEA national is involuntarily unemployed Letter from Department of Employment and Social Protection outlining any benefits which have been received			
16.	Letter from most recent employer outlining circumstances of redundancy			
17.	P45 certificate for last employment			
18.	P60 certificates for previous 2 years			
	If the EEA national is residing with sufficient resources			
19.	Evidence of EEA national's financial resources e.g. bank statements			
20.	Letter from Department of Employment and Social Protection outlining any benefits which have been received			
21.	Letter from private medical insurance provider for EEA national and dependents			
22.	Copy of private health insurance policy			
23.	Evidence of payment of private health insurance policy			

EEA national's declaration

You (the EEA national) must read the declaration below and sign. It must be signed by you and not by a representative or other person acting on your behalf. If you are under 18, your parent or guardian may sign it.

Declaration

The information I have given is complete and is true to the best of my knowledge. I also declare that the photographs submitted with this form are a true likeness of me. I confirm that if, before my application is decided, there is a material change in my circumstances or new information relevant to this application becomes available, I will inform the EU Treaty Rights Division of the Department of Justice and Equality in writing immediately. I understand that any false or misleading information or fraudulent supporting documentation submitted will result in the refusal of this application.

I acknowledge that the EU Treaty Rights Division may make enquiries to confirm any of the details or documents provided by me in this application, including my participation in an interview process.

I am aware that a person who asserts an entitlement to any rights on the basis of information which he or she knows to be false or misleading in a material particular shall be guilty of an offence and shall be liable on summary conviction to a fine not exceeding €5,000 or to a term of imprisonment not exceeding 12 months, or both.

Name of applicant (BLOCK CAPITALS)												
Date	Signed by applicant											
D D / M M / Y Y Y												
Name of parent/guardian of applicant if age	ed under 18 (BLOCK CAPITALS)											
Date												
D D / M M / Y Y Y Y												
Signed by parent/guardian of applicant if a	gea under 18											

Appendix A

EEA national's declaration of employment

- This section asks about the EEA national's employment.
- Please give details of your employer below.
- If you have more than one employment, you should copy Appendix A and B, complete for every employment and enclose with the application
- Please also provide proof of your income or salary
- Wage slips for the last 3 months and bank statements showing receipt of income should be provided.
- Please complete the checklist on page 39
- We may contact your employer to verify the information you provided.

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A2	Тур	e of	bus	ines	s (e	e.g. s	serv	ices	offe	ered	l, pro	oduc	cts n	nad	e/so	ld)							
А3	Add	ress	of I	ousi	nes	S					I		I		I	I		I	I	I		I	
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A4	Bus	ines	s Ei	rcoc	de					A5	Cor	ntac	t tele	epho	one	nun	nber	tor	em	oloy	er	ı	ı
A6	Wha	at da	ate c	lid y	ou s	start	you	ır en	nplo	yme	ent v	vith	the	bus	ines	s?							
D	D]/[M	M /	/ Y	Y	Y	Y															
A7	How	/ ma	ny h	nour	s pe	er we	eek	do y	ou '	worl	k on	ave	erag	e?									
A8	Sala	ary/V	Vag	es																			
€																							

A9 Frequency of payment (✓)			
Weekly Monthly	Annually		
A10 Please indicate what type of	employment this is (\checkmark)		
Permanent full time	Part time	Temporary	
If you answered temporary, plea	ase give the expected du	ration of the contract	

Appendix B Employer's declaration

- This section must be completed in full and submitted with your application form and should be stamped where applicable.
- It must be signed and dated by your employer/s
- INIS may contact your employer to verify the information provided

B1	Nar	ne c	of bu	sine	ess c	or co	mpa	any															
		1	1			1			l	l	<u> </u>	1	<u> </u>	<u> </u>	l	<u> </u>	l	l	<u> </u>	1	<u> </u>	l	
B2	Тур	e of	bus	ines	ss (e	e.g. s	serv	ices	offe	ered	l, pro	odu	cts r	nad	e/so	ld)							
																				<u> </u>			
В3	Add	lres	s of	busi	ines	S																	
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B6	Wh	at d	ate d	did t	his p	oers	on s	tart	the	ir er	nplo	yme	ent v	vith	the	bus	ines	s?					
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									_														
B7	Hov	v ma	any l	houi	rs pe	er w	eek	do t	hey	WO	rk oı	n av	eraç	ge?									
B8	Sal	ary/	Wag	jes																			
€																							
B9 (✓) Frequency of payment																							
Weekly Monthly Annually																							

B10 Method of payment (✓)
Cash Cheque EFT (electronic funds transfer) Other (Please explain below)
B11 Please indicate what type of employment this is (✓)
Permanent full time Part time Temporary
B12 Name (employer or authorised person)
B13 Position held in the company
I can confirm that (name of employee) has been, and
is currently, employed by (name of company) as set out
above.
B14 Signature
B15 Date
D D / M M / Y Y Y Y
B16 Company stamp or seal (If you do not have one, state "none")