



## Information about personal matters and connection to Denmark

### 1. Personal information

Name:	
Civil registration number (CPR No.), if applicable:	Person ID/Alien ID No., if applicable:
When did you enter into Denmark for the first time?:	
Have you left Denmark at any time and then later on reentered?: Yes ___ No ___ <i>(If yes, please state the period/periods and the country/countries where you stayed)</i>	
Address in Denmark:	
Telephone number:	

### 2. Information about your residency in Denmark

#### a) Employment

Employer and contact information:	Position:	Period of employment (start date – end date)

#### b) Knowledge of Danish and language school

Have you ever passed an official Danish language test? Yes ___ No ___ "Prøve i Dansk 1" ___ "Prøve i Dansk 2" ___ "Prøve i Dansk 3" ___ Other test ___
<b>IMPORTANT:</b> Remember to attach a copy of the official pass certificate or similar which proves you passed the Danish test.

### c) Vocational or higher education

Are you currently studying on a vocational or higher education course in Denmark?: Yes ____ No ____			
Name of place of study:			
Education direction:			
When did you start the course?:			
<b>IMPORTANT:</b> Remember to attach documentation, for example a copy of your acceptance letter and/or a copy of your qualifications.			
Completed education in Denmark, if any			
Name of place of study:	Name of course:	Study period	
		Started:	Finished:
<b>IMPORTANT:</b> Remember to attach documentation, for example a copy of your diploma			

### d) Social/cultural integration

Do you have/have you had any voluntary work in Denmark?: Yes ____ No ____ <i>(If you answered yes, please say where)</i>
Are you a member of an association/committee or similar?: Yes ____ No ____ <i>(If you answered yes, please name them and provide attached relevant documentation, for example a statement from the association/committee's chairman.)</i>

## 3. Family connection to Denmark and other countries

### a) Spouse/partner

Are you married? : Yes ____ No ____ Do you live at the same address as your wife/husband in Denmark?: Yes ____ No ____
If you answered no, do you then cohabite with a partner?: Yes ____ No ____

Name of your spouse/partner:

**b) Children**

Do you have children? Yes \_\_\_\_\_ No \_\_\_\_\_

*(If you dont have any children, you can go directly to section 3.C)*

Name:

Age:

Civil registration number (CPR No.):

Address:

Place of birth (city and country):

Does the child live in Denmark?: Yes \_\_\_\_\_ No \_\_\_\_\_

If your child lives in Denmark, complete the following information:

Does your child go to or has gone to a nursery?: Yes \_\_\_\_\_ No \_\_\_\_\_

*(If you answered yes, you must provide the period of attendance)*

Does your child go to or has gone to a kindergarten?: Yes \_\_\_\_\_ No \_\_\_\_\_

*(If you answered yes, you must provide the period of attendance)*

Does your child go to a school in Denmark?: Yes \_\_\_\_\_ No \_\_\_\_\_

Elementary school (Folkeskolen) class 0 – 9 \_\_\_\_\_ Class 10 \_\_\_\_\_ General Upper Secondary School (ungdomsuddannelse) \_\_\_\_\_ Higher education \_\_\_\_\_ Folk high school \_\_\_\_\_

**IMPORTANT: If you answered yes, you must provide the name of the school and attach documentation, for example registration paper ( "elevstamkort").**

Name:

Age:

Civil registration number (CPR No.):

Address:

Place of birth (city and country):

Does the child live in Denmark?: Yes \_\_\_\_\_ No \_\_\_\_\_

If your child lives in Denmark, complete the following information:

Does your child go to or has gone to a nursery?: Yes \_\_\_ No \_\_\_  
*(If you answered yes, you must provide the period of attendance)*

Does your child go to or has gone to a kindergarten?: Yes \_\_\_ No \_\_\_  
*(If you answered yes, you must provide the period of attendance)*

Does your child go to a school in Denmark?: Yes \_\_\_ No \_\_\_  
Elementary school (Folkeskolen) class 0 – 9 \_\_\_ Class 10 \_\_\_ General Upper Secondary School  
(ungdomsuddannelse) \_\_\_ Higher education \_\_\_ Folk high school \_\_\_

**IMPORTANT: If you answered yes, you must provide the name of the school and attach documentation, for example registration paper ( "elevstamkort").**

Name:

Age:

Civil registration number (CPR No.):

Address:

Place of birth (city and country):

Does the child live in Denmark?: Yes \_\_\_ No \_\_\_

If your child lives in Denmark, complete the following information:

Does your child go to or has gone to a nursery?: Yes \_\_\_ No \_\_\_  
*(If you answered yes, you must provide the period of attendance)*

Does your child go to or has gone to a kindergarten?: Yes \_\_\_ No \_\_\_  
*(If you answered yes, you must provide the period of attendance)*

Does your child go to a school in Denmark?: Yes \_\_\_ No \_\_\_  
Elementary school (Folkeskolen) class 0 – 9 \_\_\_ Class 10 \_\_\_ General Upper Secondary School  
(ungdomsuddannelse) \_\_\_ Higher education \_\_\_ Folk high school \_\_\_

**IMPORTANT: If you answered yes, you must provide the name of the school and attach documentation, for example registration paper ( "elevstamkort").**

**c) Other family members:**

Do you have any other family members in Denmark?: Yes \_\_\_ No \_\_\_

*(If you answered yes, you must provide the names and your relationship to the persons concerned, e.g. father/mother/sister/brother/uncle/aunt/grandfather/grandmother)*

Name:	Relationship:

**d) Connection to your native country and other countries**

Do you have family in your native country?: Yes \_\_\_ No \_\_\_

*(If you answered yes, you must provide the names and your relationship to the persons concerned.)*

Name:	Relationship:

Are you in contact with your family in your native country?: Yes \_\_\_ No \_\_\_

*(If you answered yes, you must state the scope of the contact.)*

Have you visited your native country while you have been resident in Denmark?: Yes \_\_\_ No \_\_\_

*(If you answered yes, you must state the reasons and the periods.)*

#### 4. Health matters

Do you suffer from any illnesses?: Yes \_\_\_\_ No \_\_\_\_

Are you receiving medical treatment in Denmark?: Yes \_\_\_\_ No \_\_\_\_

**IMPORTANT: If you answered yes, you must attach documentation, e.g. a letter or statement from your doctor.**

#### 5. Other comments

If you have anything else to add, which you think is important that the State Administration should be aware of, please write it below:

**Declaration of visitation**

**The declaration must be filled in, *only* if you have a child/children in Denmark, but the child/children does not live with both you and the child's/children's father/mother.**

Response regarding the following child/children:

Name:	Civil registration number (CPR No.):

Note: If the contact is not the same for all children, you must answer question 1-4 for each child.

1. How many days does the child/children stay with you during a normal 14-day period?:  
\_\_\_\_\_ days.
2. Does the child/children sleep over at your home?: Yes\_\_\_ No\_\_\_
3. If yes, please state which days:  
\_\_\_\_\_  
\_\_\_\_\_
4. Is the contact regular?: Yes\_\_\_ No\_\_\_

**Important: If you have a written agreement/decision regarding visitation, please attach it.**

**Declaration of consent**

**The declaration of consent will be used, if the Danish Agency for International Recruitment and Integration needs information from your child's/children's father/mother regarding the above mentioned visitation.**

For the purpose of my case, I hereby give my consent for the Danish Agency for International Recruitment and Integration to obtain information from the child's/children's mother/father regarding my child/children's visitation with both parents.

The child's/children's mother/father can be contacted at the following phone number: -----

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Date

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Signature

**I hereby declare under criminal liability in accordance with Danish criminal code section 161 and 163 and Danish immigration law section 59 and 60, that the information that I have given in this form is true and complete. If the information is later found to be false, I understand that I can be penalised with a fine, imprisonment for up to four months or under more serious circumstances, imprisonment for up to two years.**

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Date

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Signature