

Application for residence permit for EU/EEA citizens and their families*

*Also to be used by citizens of Switzerland

Dossiernummer	Signatur
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A. I am applying for a residence permit under the terms of the EEA Agreement as

- | | |
|---|---|
| <input type="checkbox"/> Employee (L1) | <input type="checkbox"/> Pensioner or other person of adequate means (L5) |
| <input type="checkbox"/> Self-employed (L2) | <input type="checkbox"/> Husband/Wife/Child of EU/EEA citizen (L6) |
| <input type="checkbox"/> Recipient/Supplier of service (L3) | <input type="checkbox"/> Parent of EU/EEA citizen (L7) |
| <input type="checkbox"/> Student (L4) | |

or

B. I am applying for a residence permit under the terms of the Swedish Aliens' Act as

- | | |
|--|---|
| <input type="checkbox"/> Husband/Wife/Partner/Child of Swedish citizen | <input type="checkbox"/> Husband/Wife/Partner/Child of citizen of a country not belonging to the EU/EEA |
| <input type="checkbox"/> Partner of EU/EEA citizen | |

Period of stay in Sweden

<input type="checkbox"/> Permanent settlement	<input type="checkbox"/> Temporary stay, from to
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Personal particulars

Surname		
Given names (in full)		
Birth date (year, month, day, ID digits if any)	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	Citizenship

Identification document and entry in Sweden

<input type="checkbox"/> National passport	<input type="checkbox"/> National ID card	Passport/ID number
Issued by	Date	Expiry date
If you are in Sweden please note which date you entered the country		

Address in Sweden

c/o	Street & no.	
Postcode & district	e-mail	
Tel. (private)	Tel. (daytime)	Tel. (mobile)

Husband/Wife/Partner (accompanying husband/wife/partner must apply separately)

Surname, given names	Birth date (year, month, day, ID digits if any)
Citizenship	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male

Accompanying children under 21 years (accompanying children must apply separately)

Surname, Given names	Birth date (year, month, day, ID digits if any)
Citizenship	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Surname, Given names	Birth date (year, month, day, ID digits if any)
Citizenship	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Surname, Given names	Birth date (year, month, day, ID digits if any)
Citizenship	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male

Parents (only to be filled out if you are under 21 years)

Your father's surname	Given names
Birth date (year, month, day, ID digits if any)	Citizenship
Your mother's surname	Given names
Birth date (year, month, day, ID digits if any)	Citizenship

Further particulars

Attachments**A. If you are applying under the terms of the EEA Agreement please enclose**

copy of passport or ID showing your citizenship and the following documents according to your category:

As Employee

- Hiring certificate

As Self-employed

- Swedish corporate registration certificate
- Other document showing that you have a business

As Recipient/Supplier of service

- Certificate clearly showing the nature and duration of the service, e.g. agreement, contract, certificate of medical treatment

As Student

- Certificate of acceptance for and duration of studies at "gymnasium" or higher education
- Statement of means of support
- Health insurance coverage certificate

As Pensioner or other person of adequate means

- Certificate or similar document confirming that you have a pension or independent means

As Husband/Wife/Child of EU/EEA citizen

- Certificate of kinship (e.g. marriage certificate, birth certificate)

As Parent of EU/EEA citizen

- Certificate of kinship
- Certificate showing that you are economically dependent on the person living in Sweden

Please note that all copies should be certified

B. If you are applying under the terms of the Swedish Aliens' Act please enclose

- | | |
|--|--|
| <input checked="" type="checkbox"/> copy of passport or ID showing your citizenship | • when applying for the first time, appendix EU/EEA A |
| <input checked="" type="checkbox"/> extract from the Population Register for you and your husband/wife/partner/child and | • when extending your permit, appendix EU/EEA B |

Signature

I am applying for a Swedish residence permit. I solemnly declare that the information I have supplied is correct.

Place and date

Signature (for minors etc., signature of custodian/guardian)