

4 Professional situation

Your professional situation

- employee since
- full-time part-time hours/week

Name and address of the employer:

Changes in your private or professional situation or that of the children, including that of any children for whom the country of residence pays family benefits, must be notified as soon as possible on your own initiative.

- unemployed, disabled, pensioned since
- with widows benefit since
- self-employed since
- without profession
- other since

Professional situation of your partner.

- employee since
- full-time part-time hours/week

Name and address of the employer:

Must not be filled in if you live alone with the children.

- unemployed, disabled, pensioned since
- survivor's pension since
- self-employed since
- without profession
- other since

5 Other family members

Fill in the details of all other family members. **Do not state the children for whom we pay child benefit.**

Relation with the children: e.g. uncle, grandmother, brother, foster father, guardian, no relation

Professional situation: e.g. self-employed, employee, retired with survivor's pension, unemployed, etc.

1. Name and first name:.....
Born onrelation.....
Professional situation
In the family from until
2. Name and first name:
Born onrelation.....
Professional situation
In the family from until

6 Signature

Incompletely filled in or unsigned forms will be returned.

I declare that I have filled in this form truthfully.
I know that the deliberate provision of incorrect data will be punished. Name

Date Signature

Phone:

