



Admission and Residence

MVV issue form for family reunification as a refugee

This form is free of charge
You must bring this completed form with you to your appointment.

Passport photo
35 by 45 mm
(width by height)

1 Personal details

1.1 Surname (family name)	<input type="text"/>	
1.2 Surname at birth (previous family name)	<input type="text"/>	
1.3 First name(s) (given name(s))	<input type="text"/>	
1.4 Date of birth	Day <input type="text"/> month <input type="text"/> year <input type="text"/>	
1.5 Place of birth	Place <input type="text"/>	Country <input type="text"/>
1.6 Nationality	Current nationality <input type="text"/>	Nationality at birth <input type="text"/>
1.7 Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	
1.8 Marital status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other (please specify) <input type="text"/>	
1.9 Home address	<input type="text"/>	
1.10 Telephone number(s)	<input type="text"/>	
1.11 Email address	<input type="text"/>	
1.12 If the applicant is a minor, details of person exercising parental responsibility/guardian	Surname <input type="text"/>	First name <input type="text"/>
	Address <input type="text"/>	Nationality <input type="text"/>
1.13 Are you residing in a country other than the country of your current nationality?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Residence permit or equivalent	No. <input type="text"/> Valid until <input type="text"/>

1.14 Type of travel document

 Ordinary passport
 Diplomatic passport
 Service passport
 Official passport

 Special passport
 Other travel document (*please specify*)

1.15 Details of travel document

Number of travel document

Date of issue

Valid until

Issued by

2 Purpose of stay in the Netherlands

2.2 Family

 Live with partner
 Live with spouse or registered partner
 Live with parents

 Live with adoptive parents
 Live with foster parents

 Family life under art. 8 ECHR
 Other humanitarian grounds

3 Signature

3.1 Please tick the box below

 I have completed this form truthfully. I am aware that the personal details I have provided will be passed on to official agencies in the Netherlands, which require this information in order to implement the Aliens Act 2000.

3.2 Place and date

Place

Day

month

year

3.3 Signature

> *If the applicant is a minor, the signature of the person exercising parental responsibility/guardian*