(for official use)	
File No.: ET	



REPUBLIC OF CYPRUS



(Form ET1)
Date of Receipt:

MINISTRY OF LABOUR, WELFARE AND SOCIAL INSURANCE WELFARE BENEFITS ADMINISTRATION SERVICE

DATA MODIFICATION FORM OF APPLICANT FOR THE CHILD BENEFIT AND THE SINGLE PARENT BENEFIT

Please fill in the applicable details in BLOCK LETTERS

APPLICANT'S DETAILS								
Identity Card No. Social Insurance No (SIN)								
Alien Registration No.(ARC)								
Passport No. Country of Issue								
Name Name								
Surname								
Head of Welfare Benefits Administration Service I inform you of the following changes to the data I have declared on my application for the Child Benefit and the Single Parent Benefit:								
Please indicate with " $$ " the category(ies) of data where a change has been made based on your application for granting the Child Benefit and the Single Parent Benefit :								
1. HOME ADDRESS								
2. BANK ACCOUNT DETAILS								
3. DEPENDENT CHILDREN THAT NO LONGER LIVE UNDER THE SAME ROOF WITH THE APPLICANT								
4. DATA RELATED TO EMPLOYMENT (salaried or self-employed)* / ABSENCE ** OR PERMANENT SETTLEMENT IN AN EU MEMBER STATE OR ANY OTHER STATE OUTSIDE OF THE REPUBLIC OF CYPRUS OF ONE OR MORE FAMILY MEMBERS								
5. DATE OF MARRIAGE								
6. START DATE OF CO-HABITATION								



etc)

7. SPOUCE/PERSON LIVING TOGETHER DETAILS



The project is co-funded by the European Social Fund of the EU

OTHER DATA (ex. date of imprisonment release of spouse, reappearance of spouse declared as missing

GIVING BIRTH TO CHILDREN WHILE THE APPLICANT IS A SINGLE PARENT BENEFICIARY

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2.	BANK ACCOUNT DETAILS																											
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	DEPENDENT CHILDREN THAT NO (Please record the Identity Card No																											
	withdrawal from the residence for each							i (C	gis	,	uti	01			, ,		Ο,	, .		ıu		ııa		c and		, uat	. Oi	
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S	4. DATA RELATED TO EMPLOYMENT (salaried or self-employed)* / ABSENCE ** OR PERMANENT SETTLEMENT IN AN EU MEMBER STATE OR IN ANY OTHER STATE OUTSIDE OF THE CYPRUS REPUBLIC ONE OR MORE MEMBERS OF THE FAMILY (please fill in what is applicable)																											
	INSURANCE NO /																											
	PERSONAL REGISTRATION NO / PERMANENT										Na	am	e/												_			
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HOME ADDRESS

^{*}In case that the applicant and/or spouse/person living together are employed within the calendar year of submitting the application each of the latter must submit an employer's certificate.

^{**} Absence is considered when a person is outside of the Republic of Cyprus for a period longer than thirty (30) days. In case that one or more family members were absent, outside of the Republic of Cyprus, it is essential that the reason of absence be recorded for each of those persons.

Full name	Reason of absence	
5. Date of marriage://		
(A marriage certificate must be attach	ned)	
6. Start date of co-habitation:/	/	
7. SPOUSE/PERSON LIVING TOGETH	IER DETAILS AND STATUS	
 Giving birth to children while the apeach of those children MUST be 		eneficiary. If yes <u>a birth certificate for</u> YES \(\Boxed{\omega}\) NO \(\Boxed{\omega}\)
9. OTHER INFORMATION		
	SOLEMN DECLARATION	
I hereby solemnly declare that the above is and on conviction I am liable to the penalties		on, I realize that I shall be guilty of an offence e laws.
I also declare that if my family circumstance form change, I will inform on time the Welfar	es change or any other elemer e Benefits Administration Servic	nt included in the application or in the present
Date	Signature of the applicant	Signature of the spouse/person living together

IMPORTANT INFORMATION:

- This form must be filled in and submitted by the applicant <u>within thirty (30)</u> days from the date of change of any
 of the elements that are included in the application for the Child Benefit and the Single Parent Benefit or any
 other further data that may have been submitted.
- On page 1 the APPLICANT's details <u>MUST</u> be filled in (whatever is applicable) as well as anything where a data change has been made in relation to the data which has been declared on the «Application for the Child Benefit and the Single Parent Benefit».
- 3. Along with this form all required documents must also be submitted.