D-209



APPLICATION FORM REGARDING AU-PAIR PLACEMENT

Please fill out this form carefully and remember to sign it. An application form that it not filled out in a satisfactory manner may result in delays of the procedure or in the application being denied.

For whom is the application form?

The form is intended for individuals aged 18-25 wishing to come to Iceland and work as an au-pair in the home of a family that has no family ties with the applicant. An au-pair is expected to carry out light household chores and babysit in return for pocket money, however, the au-pair is not to carry out full work in the home and receive wages for such work.

Rights

- An au-pair may not be in Iceland when applying for the permit unless the applicant is subject to non-visa requirement.
- The permit may be granted for one (1) year, however, never longer than the period of validity of the au-pair contract with the host family.
- The permit will generally not be renewed.
- An au-pair cannot apply for a work permit and may therefore not work outside or inside the home.
- The residence permit is not a basis of a permanent residence permit.

What documents must accompany the application?

See further the information regarding data requirements on the website of the Directorate of Immigration.

- Written contract between the au-pair and the host family.
 See the contract on the website of the Directorate of Immigration.
- Passport photograph (35 mm x 40 mm).
- Photocopy of the passport.
- Copy of a foreign criminal record certificate.
- Translation by an authorized translator of a criminal record certificate if applicable.
- Medical-expense insurance.
- Maintenance documents by the host family.

How is an application submitted?

An application may be submitted and paid for at the reception desk of the Directorate of Immigration or at the office of a district commissioner outside of the Reykjavík capital area. If the applicant is in Iceland, he/she must appear in person. If an application is sent by mail a payment receipt must be enclosed.

Please note that if the applicant submits an application in person he/she should bring his/her passport along.

Information about the processing fee

A fee must be paid for the processing of an application for a residence permit and the application will not be processed without payment. An application that has not been paid for will be returned to the applicant. Further information about the processing fee is in part 14 of the application form and also on the website of the Directorate of Immigration.

Objectives regarding time of procedure and process

The Directorate of Immigration expedites as possible its processing of applications in accordance with the Administrative Procedures Act no. 37/1993. If the applicant provides all the required information in the application form and submits satisfactory accompanying documents with the application, the processing of the application will take less time.

The Directorate of Immigration contacts the applicant or his/her representative if further documents are needed for processing the application.

Please note that the reception-desk personnel of the Directorate of Immigration do not assess applications or accompanying documents.

Other information

Further information about applications and processing time is on the website of the Directorate of Immigration (www.utl.is).

To be filled out by the Directorate of Immigration			
Er umsóknin undirrituð af umsækjanda?	□ Já	□ Nei	
Er umsóknin í frumriti?	□ Já	□ Nei	
Hafa allar umbeðnar upplýsingar verið veittar (þ.m.t. heimilisfang, netfang og símanúmer)?	□ Já	□ Nei	
Fylgir ráðningarsamningur á milli au pair og vistfjölskyldu?	□ Já	□ Nei	
Fylgir ljósrit af persónusíðu, rithandarsýnishorni og öllum stimpluðum síðum vegabréfs?	□Já	□ Nei	



1. Application for a residence permit and period of validity

State information about the period you wish the permit to apply to and whether this is a first permit or a permit on a new ground. Note that a permit can only be granted for one (1) year, however, not longer than until the end of the period of validity of the contract between the au-pair and the host family.

If either you or the host family cancels the contract you may enter into a contract with a new family in which instance a new application must be submitted to the Directorate of Immigration. All requirements for a residence permit must be met and the total period of stay with host families in Iceland may not exceed one (1) year.

I apply for: a) First residence permit b) Extension of a contract with a c) Permit on grounds of a contra a new host family If you request a permit on grour reason/s you want to change ho	ct with	a new	From - start dat (dd.mm.yy.) To - end date (dd.mm.yy.)			
2. The applicant						
Given name						
Surname						
Former names (if applicable)						
Date of birth (dd.mm.yy.)						
Gender	Marital status					
Male □	Cohabitation			Widow/widower		
Female \Box	Unmarried			Separated		
	Married			Divorced		
Place of birth (city)						
Country of birth						
Current nationality/nationalities						
Former nationality (if applicable)						
Are both or one of your parents	Icelandic citizens?		Both \square	One \square	Neither	
Address, email and telephone numl This information will be used to contact procedure of the application you are kin	the applicant; therefore it	is import				s during the
Address			<u> </u>	0		
Postal code and city						
Country			***************************************	***************************************		
Telephone number						
Email address						



Address, email and telephone numbers in Iceland A requirement for a residence permit being issued is that the applicant has stated his/her address in Iceland. Declared address will be registered as the applicants domicile at Registers Iceland. The information will also be used to contact the applicant; hence it is important that the information is correct. If the information changes during the processing of the application you are requested to immediately notify the Directorate of Immigration of this using the email: utl@utl.is After a permit has been issued any changes of address must be reported to Registers Iceland.							
Address							
Postal code and city							
Telephone number							
Email address							
Address has not been provided.		address submitted a	fter arrival in	Iceland (for examp	le, during pl	notographing	ξ).
3. Information about passport and	l residence						
Please note that a valid passport is required residence permit. Photocopies of the passp							
Passport number							
Other travel documentation, state	which						
Country in which the passport is is	sued						
Issued by							
Date of issue (dd.mm.yy.)							
Date of expiry (dd.mm.yy.)							
Does not have a valid passp	ort (Why not? I	Kindly explain in p	art 11 of th	nis form).			
Visa							
Do you have a valid visa for enteri	I	n Area?		Yes 📙		No l	
If yes, what is the visa's period of	validity?						
Residence abroad Where have you lived over the last	five (5) years?						
Country				Date from (dd.r	nm.yy.) I	Date to (dd.	.mm.yy.)
1.							
2.	•••••					•	
3.							
4.	•••••					•	
5.							
6.							
Residence in Iceland You may not be in Iceland when applying fo If you need a visa to travel to Iceland and a							
When do you intend to come to Ic	eland?			State the date	(dd.mm.yy	.)	
Have arrived in Iceland				When did yo (dd.mn			
Have you ever applied for a visa to	Yes		No				
Have you previously applied for a	residence perm	it in Iceland?		Yes		No	
Have you been in Iceland before?				Yes		No	
If yes, when and how long?							



	Applicant's spouse/o u-pair residence permi			tht t	o family reunifica	ıti	on.				
Арр	licant's spouse or coh	abiting pa	rtner								
I don	't have a spouse or cohabiti	ng partner									
Giv	en name										
Sui	rname										
Former names (if applicable)											
Bir	th date (dd.mm.yy.)										
Nationality											
Da	te of marriage (dd.m	ım.yy.)									
	te of the registratior nabitation (dd.mm.y										
	Applicant's children										
	n au-pair residence per	mit does	not grant any	rigl	ht to family reunit	fic	ation.				
App	licant's children		T								
I do	o not have children	- T						· T ······			
	Given name	Sur	name		Date of birth (dd.mm.yy.)		Nationality	ļ	nder	Is the child	T
1.				Т	(uu.iiiii.yy.)	-		Female	Male	Yes	No 📗
2.						+					
3.						-					
4.						+					
5.						-					
6.						+					
6.	Applicant's parents					_i_					
	air residence permit d	oes not gi	rant any right	to f	family reunification	on					
Appl	licant's father										
Give	n name										
Surr	name										
Forr	ner name (if applical	ole)									
Date	Date of birth (dd.mm.yy.)										
Date of death (dd.mm.yy.), (if applicable)											
Nati	onality										
Address											
Post	al code and city										
Cou	ntry										
k											<u></u>



Applicant's mother						
Given name						
Surname						
Former name (if applicable)						
Date of birth (dd.mm.yy.)						
Date of death (dd.mm.yy.), (if applied	cable)					
Nationality						
Address						
Postal code and city						
Country						
7. Host family and the au-pair pla	cement in Iceland					
Host family						
Given name	Surname	ID no.(Kennitala)	Nationality			
1.						
2.						
3.						
4.						
5.						
Further information						
Why do you wish to come to Iceland a	s an au-pair?					
How did you choose the host family?						
Why did you choose this host family?						



8. Applicant's relatives in Iceland Write here whether you have relatives in Iceland and whether you have family ties with the host family. Family ties between an au-pair and a host family are not permitted. An application will be denied if there are family ties between the applicant and the host family.								
		mily ties with th		amily.				
	I have the fo	ollowing relative	s in Icel	land:				
	Given name	Surname		Date of birth (dd.mm.yy.)	Nationality	Ple	ease state relations	hip/kinship
Langu Nati	anguage skills, lage skills live language	education and I	professi	ional experience				
Educa	ition level							
		oplicable boxes, h	owever,	only stating education	that is completed.			
	None or less t	chan primary scho	ol					
	Primary school		-	Year of graduation:				
	Secondary scl		-	Year of graduation:				
	-	hool, additional le ss than BA/BS deg		Year of graduation:				
	-		; ee -	Year of graduation:				
	University, BA		-	Year of graduation:				
		aster's degree octor's degree		Year of graduation: Year of graduation:				



	of study, highest edu	ıcation								
	General studies				IT and communicatio	n				
	Education				Civil engineering, pro	duction and construction				
	Arts and humanitie	es			Agriculture, forestry,	fisheries and veterinary studies				
	Social science, jou	rnalism and informatio	on theory		Health					
	Business, administ	ration and law			Welfare					
	Science, mathema	tics and statistics			Service					
Studie	Studies over the last five (5) years									
	School	Country	From (dd.m	m.yy.)	To (dd.mm.yy.)	Studies				
1.										
2.										
3.										
4.										
5.										
Profes	sional career over th	e last five (5) years								
	Employer	Country	From (dd.m	m.yy.)	To (dd.mm.yy.)	Job title				
1.										
2.										
3.										
4.										
5.										
Please s record o than six Nordic l	10. Criminal record Please submit a criminal record certificate from the country or countries where you have resided over the last five (5) years. The crimina record certificate must be received in original format, be lawfully confirmed (i.e. apostille or double confirmation), and may not be older than six (6) months when submitted to the Directorate of Immigration. If the certificate is in another language than English or one of the Nordic languages, a translation must accompany the original, translated by an authorized translator. See further www.utl.is.									
А. Н		d or sentenced to im	iprisonment?							
	No Yes									
	State the offence	e:								
	In what country? What penalty did you receive?				When?					



В.	Do you have the status of a suspect in a police investigation?
	No
	Yes
	State the offence:
	In what country? When?
C.	Do you authorize the Directorate of Immigration to check your criminal record with foreign authorities?
	Yes
	No
	If no, state the reason why:
D.	Have you been subject to a re-entry ban into the Schengen Area?
	No
	Yes
	In what country?
	Is the ban still in effect?
	No. When was it in effect?
	Yes. When does the ban expire?
11.	Additional information
	have further information of significance regarding your application for a residence permit in Iceland, kindly state it here in the box
belov	v.



Applies	only to applicants for first resid	dence permit.	
If your	application is accepted, the Dire	where do you wish to obtain the visa? ectorate of Immigration may send a request for a D-visa to Danish or Norwegian embassies	
represe	nting Iceland and as listed on t	he websites of the Directorate of Immigration and the Icelandic embassies in China and Russi	ia.
13. A	oplicant's representative		
this efformust se	ect to the Directorate of Immig	sentative at any time. An applicant wishing to replace his/her representative must submit a for ration. If an applicant wishes to withdraw his/her authorization for representation, the applice. Directorate of Immigration stating such change. Please note that the representative may no	cant
Chec	k the box regarding authorizat	ions	
that	the representative will have a	cluding correspondence) with the Directorate of Immigration will be with my representative ccess to the information and data in my application. ot I, will receive information about the conclusion of my application.	and
	I authorize the following inc	lividual to represent me regarding this application,	
	to receive documents on my	y behalf,	
	to appeal a decision by the application being refused.	Directorate of Immigration to the Immigration and Asylum Appeals Board in the event of my	
Inforn	nation about the representativ	re	
Give	en name		
Suri	name		
ID n	umber (Kennitala)		
Add	ress		
Pos	cal code and city		
Cou	ntry		
Tele	phone number		
Ema	il address		
App	icant's signature		

14. Processing fee

Visa

The Directorate of Immigration and district commissioners outside of the Reykjavík metropolitan area receive applications for residence permits in return for the payment of a processing fee. The amount of the fee is decided in the Act no.88/1991 on Additional Revenues of the National Treasury.

If the processing fee is not paid the application will not be processed. An application that has not been paid for will be returned to the applicant.

An application may be submitted on behalf of the applicant and paid for at the reception desk of the Directorate of Immigration or at the offices of district commissioners outside of the Reykjavík metropolitan area. An application sent by mail must be accompanied by a payment receipt and if the applicant is in Iceland he/she must appear in person.

Please note that if the applicant submits an application in person he/she should bring his/her passport along.

See further information on the website of the Directorate of Immigration (www.utl.is).



15. Did you remember everything?

If the application form is correctly filled out and accompanied by all relevant data, this will expedite the application's procedure. It is therefore important that you check whether your application is well filled out, whether correct information is stated and whether you have submitted all necessary data.

The Directorate of Immigration recommends that you use the checklist below to ensure that your application is satisfactory.

The Directorate of Immigration may request additional data if it feels there is a need to examine whether the requirements for a residence permit are met.

16. A	pplicant's checklist
	Original written contract between an au pair and the host family. See contract on our website utl.is, under forms.
	Passport photo (35 mm x 45 mm).
	Photocopies of the personal information page and signature page of your passport. The passport's period of validity must be at least three (3) months longer than the period of validity of a residence permit.
	Copy of criminal record certificate issued by the highest authority competent to issue such certificates in the applicant's country of residence, not older than 12 months.
	Translation by an authorized translator of the criminal record certificate (only applies if a foreign criminal record certificate is in another language than English or a Nordic language). Certified confirmation is required of the translation if done by a translator who does not hold formal authorization in Iceland as a translator, i.e. apostile or double confirmation.
	Medical expense insurance , valid for six (6) months, minimum ISK 2,000,000 (issued by an insurance company that is licensed to operate in Iceland).
	Document of support from the host country , stating minimum maintenance costs. The additional maintenance is based on 50% of the minimum maintenance for an individual, i.e. ISK 90,275 per month plus the wage costs for the au pair, ISK 60,000 for every four weeks in au pair service. For further information please see our website www.utl.is
	The applicant has signed the application.

Date and signature

I hereby apply for an Icelandic residence permit and confirm with my signature that the information I have stated in this application form, in annexes and the accompanying documents as being true and correct. I understand that giving misleading or false information to public authorities is punishable according to the Icelandice Penal Code No. 19/1940, and could result in denial or withdrawal of a residence permit and possibly expulsion on grounds of the Act on Foreigners No. 80/2016 . Violations of the Act on Foreigners are reported to the police.

I am informed of it being permissible to integrate data held by the Directorate of Immigration, the Immigration and Asylum Appeals Board, Registers Iceland and the police according to the Act on Foreigners. The Directorate of Immigration is furthermore authorized to obtain information from the tax authorities, the Directorate of Labor and the municipal social services according to the same law.

I am furthermore informed of how the Directorate of Immigration may obtain further information if necessary because of this application and as provided for by the Data Protection Act no. 77/2000.

I realize that the information I provide might be used regarding the processing of subsequent applications and/or applications by family members.

I am informed that the Directorate of Immigration forwards data to Registers Iceland as necessary for registration in Registers Iceland.

I agree to undergo medical examination within two weeks from arrival in Iceland according to applicable law and as instructed by health authorities.



Place	e, date and applicant's signatur	e			
Pla	ce				
Dat	te of signature				
Ар	plicant's signature				
Who	o filled out the application?	j			
Applicant					
	Representative				
	Another person, who?				
Co	nnection to the applicant				
Tob	e filled out by the Directora	te of Immigration			
	Dvalarleyfi veitt til				
	Afgreitt				