



**APPLICATION FOR  
VERIFICATION OF FAMILY  
RELATIONSHIP**

**THIS APPLICATION FORM IS  
FREE OF CHARGE**

**PHOTO**

1	SURNAME (FAMILY NAME) <sup>1</sup>		
2	FIRST NAME(S) (GIVEN NAME(S)) <sup>2</sup>		
3	SURNAME AT BIRTH		
4	FORMER FAMILY NAME(S)		
5	DATE OF BIRTH (DAY-MONTH-YEAR)		
6	PLACE OF BIRTH		
7	COUNTRY OF BIRTH		
8	CURRENT NATIONALITY		
9	NATIONALITY AT BIRTH, IF DIFFERENT FROM CURRENT:		
10	SEX	MALE	
		FEMALE	
11	MARITAL STATUS	SINGLE	
		MARRIED	
		SEPARATED	
		DIVORCED	
		WIDOW(ER)	
		OTHER (PLEASE SPECIFY)	
12	IN CASE OF MINORS - DETAILS OF PARENTAL AUTHORITY/LEGAL GUARDIAN	SURNAME	
		FIRST NAME	
		ADDRESS (IF DIFFERENT FROM APPLICANT'S)	
		NATIONALITY	
13	NATIONAL IDENTITY NUMBER (WHERE APPLICABLE)		
14	TYPE OF TRAVEL DOCUMENT	ORDINARY PASSPORT	
		OTHER TRAVEL DOCUMENT (PLEASE SPECIFY)	
15	NUMBER OF TRAVEL DOCUMENT		
16	DATE OF ISSUE OF TRAVEL DOCUMENT		
17	TRAVEL DOCUMENT VALID UNTIL		
18	TRAVEL DOCUMENT ISSUED BY		
19	APPLICANT'S HOME ADDRESS		
20	APPLICANT'S EMAIL ADDRESS		
21	APPLICANT'S TELEPHONE NUMBER		
22	RESIDENCE IN A COUNTRY OTHER THAN THE COUNTRY OF CURRENT NATIONALITY	NUMBER OF RESIDENCE PERMIT OR EQUIVALENT	
		RESIDENCE PERMIT OR EQUIVALENT VALID UNTIL	
23	CURRENT OCCUPATION		

1 In accordance with the data in the travel document.  
2 In accordance with the data in the travel document.

DATA OF THE INDIVIDUAL RESIDENT IN GREECE AND FAMILY RELATIONSHIP WITH THE APPLICANT		
24	SURNAME (FAMILY NAME) OF THE RESIDENT INDIVIDUAL IN GREECE	
25	FIRST NAME(S) (GIVEN NAME(S)) OF THE RESIDENT INDIVIDUAL IN GREECE	
26	DATE OF BIRTH OF THE RESIDENT INDIVIDUAL IN GREECE	
27	NATIONALITY OF THE RESIDENT INDIVIDUAL IN GREECE	
28	NUMBER OF THE RESIDENCE PERMIT OF THE RESIDENT INDIVIDUAL IN GREECE	
29	NUMBER OF PASSPORT OF THE RESIDENT INDIVIDUAL IN GREECE	
30	INDIVIDUAL RESIDENT'S ADDRESS IN GREECE	
31	INDIVIDUAL RESIDENT'S TELEPHONE	
32	INDIVIDUAL RESIDENT'S EMAIL ADDRESS	
33	FAMILY RELATIONSHIP (OF THE APPLICANT WITH THE INDIVIDUAL RESIDENT IN GREECE)	SPOUSE
		CHILD OF THE INDIVIDUAL RESIDENT
		CHILD OF HIS/HER SPOUSE
		OTHER (PLEASE SPECIFY)
34	I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements will lead to my application being rejected.	
35	PLACE	
36	DATE	
37	SIGNATURE (FOR MINORS, SIGNATURE OF PARENTAL AUTHORITY/LEGAL GUARDIAN)	
O F F I C I A L  U S E		