

Application form for a provisional residence permit under temporary protection	
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*All requested information must be completed*

### **Your personal information**

Male  Female

LAST NAME :	FIRST NAME :
GIVEN NAME :	
DATE OF BIRTH : __/__/----	PLACE OF BIRTH :
PLACE OF RESIDENCE IN UKRAINE :	
NATIONALITY :	

### **Your contact information**

ADDRESS :	
E-MAIL ADDRESS :	
TEL. No. : _____	

### **Your arrival in France**

PASSPORT No. OR TRAVEL DOCUMENT :
OR, FAILING THAT, AN IDENTITY CARD (ex. INTERNAL PASSPORT) :
ISSUING AUTHORITY :
VALID FROM __/__/---- TO __/__/----
DATE OF ENTRY IN FRANCE : __/__/----

Have you ever been granted a residence document in France ?  Yes  No

If so, please indicate your foreign number (10 digit number) : \_\_\_\_\_

**Your family situation**

Single  Married  Spouse  Widowed  Divorced/separated

LAST NAME OF THE SPOUSE :	FIRST NAME OF THE SPOUSE :
DATE OF BIRTH OF THE SPOUSE :	PLACE OF BIRTH OF THE SPOUSE :
NATIONALITY OF THE SPOUSE :	ADDRESS OF RESIDENCE OF THE SPOUSE IN UKRAINE :
	CURRENT ADDRESS OF RESIDENCE OF THE SPOUSE (IF DIFFERENT) :
DATE OF MARRIAGE :	
DATE OF DEATH OF THE SPOUSE :	
DATE OF COMMENCEMENT OF THE COHABITATION :	

Has your spouse already been granted a residence document in France ?  Yes  No

If so, please indicate his/her foreign number (10 digit number) : \_ \_ \_ \_ \_

**Your children**

LAST NAME	FIRST NAME	NATIONALITY	Date of birth	SEX	Presence in France (yes/no)	Passport number or identity document (if applicable and if present in France)

**Other members of your family in France**

LAST NAME	FIRST NAME	FAMILY RELATIONSHIP	NATIONALITY	Date of birth	SEX	Date of entry in France

**Your family in the European Union**

Do you have family members currently in other European Union member states or associated states (Iceland, Lichtenstein, Norway, Switzerland) ? If so, can you fill in the table below ?

LAST NAME	FIRST NAME	FAMILY RELATIONSHIP	NATIONALITY	Date of birth	SEX	Host country	Beneficiary of temporary protection (YES/NO)

**Your work status**

Occupation :

Are you currently employed in France ?  Yes  No

If so :

NAME OF THE CURRENT EMPLOYER :	
ADDRESS OF THE CURRENT EMPLOYER :	

Has your employer requested a work permit from the « main d'œuvre étrangère » service (« foreign labour service ») ?  Yes  No

**Your eligibility for temporary protection**

Please tick the box that describes your situation :

1. You are a Ukrainian citizen and you were residing in Ukraine before 24 February 2022 ;
2. You are not a Ukrainian national and you benefit from international protection or equivalent national protection in Ukraine ;
3. You are a family member of a Ukrainian national referred to in points 1 or 2 ;
4. You are not a Ukrainian national and you hold a valid permanent residence permit issued in accordance with Ukrainian law.

I, the undersigned, ..... certify that the information in this form is complete and accurate in relation to my personal situation.

Signed in XXX, on XXX

Signature of the applicant

**For official use**

**Additional information :**

Is the applicant unfavourably known in police files ?  Yes  No

Are the applicant or his/her minor children in a vulnerable situation or do they appear to be ?  
 Yes  No

If so, please describe :

**Decision :**

The benefit of temporary protection is granted to the applicant and his/her minor children :  
 Yes  No

**Comments :**