

APPLICATION FOR A RESIDENCE PERMIT FOR PARENTS 67 YEARS OF AGE AND OLDER

Please fill out this form carefully and remember to sign it. An application form that is 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 only intended for an individual, age 67 years or older, who has an adult child living in Iceland, and plans to move to Iceland. The requirement is that the adult child of the parent in question is Icelandic or a foreign citizen, holding a permanent residence permit or a temporary residence permit on grounds of work requiring professional expertise, for athletes, on grounds of marriage or cohabitation, international protection, humanitarian views or special ties to Iceland.

What documents must be submitted with the application?

This applies to first application, please check the website of the Directorate of Immigration for information on documents to be submitted with renewal.

- 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.
- Documents on financial support.
- Confirmed copy of the original birth certificate of the applicant's adult child that is residing in Iceland.
- Translation by an authorized translator of the birth certificate, if applicable.
- Application for work permit on grounds of family reunification and an employment contract, (if applicable).

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.

The applicant must appear in person when applying for renewal of his/her residence permit, either at the reception of the Directorate of Immigration or at offices of district commissioners outside of the Reykjavík Capital Area.

The applicant will be photographed and must submit a sample of his/her signature.

Please note that a person that hands in his/her own application needs to show his/her passport at the service desk.

Information about the processing fee

A fee must be paid for the processing of the 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 processing time 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 is contained 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? | <input type="checkbox"/> Já | <input type="checkbox"/> Nei |
| Er umsóknin í frumriti? | <input type="checkbox"/> Já | <input type="checkbox"/> Nei |
| Hafa allar umbeðnar upplýsingar verið veittar (þ.m.t. heimilisfang, netfang og símanúmer)? | <input type="checkbox"/> Já | <input type="checkbox"/> Nei |
| Fylgir ljósrit af persónusíðu og rithandarsýnishorni vegabréfs? | <input type="checkbox"/> Já | <input type="checkbox"/> Nei |
| Fylgir fæðingarvottorð barns umsækjanda á Íslandi? | <input type="checkbox"/> Já | <input type="checkbox"/> Nei |



Rights attached to the permit

- An applicant to whom a visa requirement applies **may not** be in Iceland when applying for the permit and while the application is being processed.
- An applicant who is exempt from the visa requirement may be in the country when applying for the permit and during its processing for as long as the non-visa requirement applies.
- An applicant that wants to apply for a work permit may not begin working until a residence and work permit has been granted, and the work permit is only valid for the specified employer.
- A residence permit is generally granted for one (1) year at a time, however, two (2) years as a maximum at a time.
- A residence permit may be renewed for two (2) years as a maximum, provided the requirements for the permit are still met, however, the permit may never be valid longer than the permit of the person on which the applicant bases his/her right
- The residence permit entails a right to family reunification with the applicant's spouse or cohabiting partner after at least one (1) year of cohabitation if the holder of the residence permit has worked or studied in Iceland in lawful stay over the last four (4) years before the application is submitted.
- The residence permit may be a basis of a permanent residence permit.
- An individual may have the right to Icelandic citizenship if his/her stay in Iceland has been continuous and legal for seven (7) years, provided certain other requirements are met.

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 changed issued permit.

I apply for:

- a) First residence permit
- b) Renewal¹
- c) A permit on new grounds

I request the period of validity of the residence permit being:

From (dd.mm.yy.)

To (dd.mm.yy.)

¹ If a renewal of the residence permit is not applied for before the period of validity expires, the application will be processed as if this were an application for a first permit

2. The applicant

| | | | |
|--|------------------------------------|-------------------------------------|--|
| Given name | | | |
| Surname | | | |
| Former names (if applicable) | | | |
| Date of birth (dd.mm.yy.) | | | |
| Gender | Marital status | | |
| Male <input type="radio"/> | Unmarried <input type="radio"/> | Widow/widower <input type="radio"/> | |
| Female <input type="radio"/> | Cohabitation <input type="radio"/> | Separated <input type="radio"/> | |
| | Married <input type="radio"/> | Divorced <input type="radio"/> | |
| Place of birth (city) | | | |
| Country of birth | | | |
| Current nationality/nationalities | | | |
| Former nationality (if applicable) | | | |
| Address, email and telephone numbers in the home country | | | |
| This information will be used to contact the applicant; therefore it is important that this information is correct. If the information changes during the processing of the application you are kindly requested to notify the Directorate of Immigration of this using the email: utl@utl.is. | | | |
| Address | | | |
| Postal code and city | | | |
| Country | | | |
| Telephone number | | | |
| Email address | | | |

Address, email and telephone number in Iceland

A requirement for issuance of a residence permit is that the applicant has stated his/her place of stay in Iceland, cf. Act no. 80/2016 on Foreigners. The stated address will be registered by Registers Iceland as the applicant's domicile. The information will be used to contact the applicant; hence it is important that such information be correct. If the information changes while the application is being processed, kindly notify the Directorate: utl@utl.is.

| | | |
|----------------------|--|--|
| Address | | |
| Postal code and city | | |
| Telephone number | | |
| Email | | |

Address not yet known. Notification of residence in Iceland will be handed in after arrival in Iceland e.g. when applicant attends the required photoshoot.

3. Information about passport and residence

Passport

Please note that a valid passport is required and the period of validity of the passport must be at least three (3) months longer than the validity of the residence permit. Photocopies of the passport's personal information page and signature page must be submitted with the application.

| | | |
|---|--|--|
| Passport number | | |
| Other travel documents state which | | |
| Country in which the passport is issued | | |
| Issued by | | |
| Date of issue (dd.mm.yy.) | | |
| Date of expiry (dd.mm.yy.) | | |

Does not have a valid passport (Why not? Kindly explain in **part 11** of this form).

Residence abroad

Where have you lived over the last five (5) years?

| | Country | Date from (dd.mm.yy.) | Date to (dd.mm.yy.) |
|----|---------|-----------------------|---------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |

Residence in Iceland

Only applicable for those applying for first permit.

| | | |
|--|----------------------------------|--------------------------|
| When do you intend to come to Iceland? | State the date (dd.mm.yy.) | |
| Have arrived in Iceland <input type="checkbox"/> | When did you arrive? (dd.mm.yy.) | |
| Have you ever applied for a visa to come to Iceland? | Yes <input type="radio"/> | No <input type="radio"/> |
| Have you previously applied for a residence permit in Iceland? | Yes <input type="radio"/> | No <input type="radio"/> |
| Have you been in Iceland before? | Yes <input type="radio"/> | No <input type="radio"/> |
| If yes, when and how long? | | |

4. Applicant's spouse or cohabiting partner

Applicant's spouse or cohabiting partner

| | | |
|--|--|--|
| Given name | | |
| Surname | | |
| Former names (if applicable) | | |
| Birth date (dd.mm.yy.) | | |
| Nationality | | |
| Date of marriage (dd.mm.yy.) | | |
| Date of the registration of cohabitation (dd.mm.yy.) | | |

5. Applicant's children

The residence permit is based on family reunification with an adult child residing in Iceland. Please state information about your children, both residing in Iceland and abroad.

Applicant's children

| | Given name | Surname | Date of birth (dd.mm.yy.) | Nationality | Gender | | Is the child in Iceland? | |
|----|------------|---------|---------------------------|-------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | | | | | Female | Male | Yes | No |
| 1. | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. Applicant's parents

Applicant's father

| | |
|--|--|
| Given name | |
| Surname | |
| Former name (if applicable) | |
| Date of birth (dd.mm.yy.) | |
| Date of death (dd.mm.yy.), (if applicable) | |
| Nationality | |
| Address | |
| Postal code and city | |
| Country | |

Applicant's mother

| | |
|-----------------------------|--|
| Given name | |
| Surname | |
| Former name (if applicable) | |
| Date of birth (dd.mm.yy.) | |

| | |
|--|--|
| Date of death (dd.mm.yy.), (if applicable) | |
| Nationality | |
| Address | |
| Postal code and city | |
| Country | |

7. Applicant's relatives in Iceland

State whether you have other relatives in Iceland.

| <input type="checkbox"/> | I have no other relatives/family in Iceland | | | | |
|--------------------------|---|---------|------------------------------|-------------|---------------|
| <input type="checkbox"/> | I have the following relatives/family members in Iceland: | | | | |
| | Given name | Surname | Date of birth (dd.mm.yy.) | Nationality | State kinship |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

8. Language skills and education

Language skills

| | |
|-----------------|--|
| Native language | |
| Other language | |

Education level

Please check all the applicable boxes, however, only stating education that is completed.

| | | | |
|--------------------------|-------------------------------------|-----------------------|--|
| <input type="checkbox"/> | None or less than primary school | | |
| <input type="checkbox"/> | Primary school | - Year of graduation: | |
| <input type="checkbox"/> | Secondary school | - Year of graduation: | |
| <input type="checkbox"/> | Secondary school, additional levels | - Year of graduation: | |
| <input type="checkbox"/> | University, less than BA/BS degree | - Year of graduation: | |
| <input type="checkbox"/> | University, BA/BS degree | - Year of graduation: | |
| <input type="checkbox"/> | University, master's degree | - Year of graduation: | |
| <input type="checkbox"/> | University, doctorate degree | - Year of graduation: | |

Fields of study, highest education

Check only one box.

| | | | |
|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> | General studies | <input type="checkbox"/> | IT and communication |
| <input type="checkbox"/> | Education | <input type="checkbox"/> | Civil engineering, production and construction |
| <input type="checkbox"/> | Arts and humanities | <input type="checkbox"/> | Agriculture, forestry, fisheries and veterinary studies |
| <input type="checkbox"/> | Social science, journalism and information theory | <input type="checkbox"/> | Health |
| <input type="checkbox"/> | Business, administration and law | <input type="checkbox"/> | Welfare |
| <input type="checkbox"/> | Science, mathematics and statistics | <input type="checkbox"/> | Service |

9. Stay abroad

Only applies to those renewing their residence permit.

List all of your travels abroad during the period of validity of your latest residence permit until the date this application is submitted. A permit holder may not stay abroad for more than three (3) months per every 12-month period while the residence permit is valid. The Directorate of Immigration decides whether a residence permit should be rescinded if a permit holder has stayed abroad for more than three (3) months.

Where have you stayed during the stated period?

| | Country | Date of departure from Iceland (dd.mm.yy.) | Date of arrival in Iceland (dd.mm.yy.) | Number of days abroad | Purpose of stay abroad |
|----|---------|--|--|-----------------------|------------------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

10. Criminal record

Please submit with a first permit a criminal record certificate from the country or countries where you have resided over the last five (5) years. The criminal 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.

A. Have you been fined or sentenced to imprisonment?

| | |
|-----------------------|-----|
| <input type="radio"/> | No |
| <input type="radio"/> | Yes |

State the offence:

In what country? When?

What penalty did you receive?

B. Do you have the status of a suspect in a police investigation?

| | |
|-----------------------|-----|
| <input type="radio"/> | No |
| <input type="radio"/> | 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

If you have further information of significance regarding your application for a residence permit in Iceland, kindly state it here in the box below.

12. Visa

Applies only to applicants for first residence permit.

If you need a visa to come to Iceland, where do you wish to obtain the visa?

If your application is accepted, the Directorate of Immigration may send a request for a D-visa to Danish or Norwegian embassies representing Iceland and as listed on the website of the Directorate of Immigration and the Icelandic embassies in China and Russia.

13. Applicant's representative

An applicant may only have one representative at any time. An applicant wishing to replace his/her representative must submit a form to this effect to the Directorate of Immigration. If an applicant wishes to withdraw his/her authorization for representation, the applicant must send a written notification to the Directorate of Immigration stating such change. Please note that the representative may not sign the application.

Check the box regarding authorizations

I realize that all communication (including correspondence) with the Directorate of Immigration will be with my representative and that the representative will have access to the information and data in my application.

I realize that my representative, not I, will receive information about the conclusion of my application.

I authorize the following individual to represent me regarding this application,

to receive documents on my behalf,

to appeal a decision by the Directorate of Immigration to the Immigration and Asylum Appeals Board in the event of my application being refused.

Information about the representative

| | | |
|------------------------------|--|--|
| Given name | | |
| Surname | | |
| ID number (Kennitala) | | |
| Address | | |
| Postal code and city | | |
| Country | | |
| Telephone number | | |
| Email address | | |
| Applicant's signature | | |

14. Processing fee

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

If the service 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 capital 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. Applicant's checklist

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Payment receipt (If the application has been paid for at a bank). |
| <input type="checkbox"/> | Passport photo (35 mm x 45 mm). |
| <input type="checkbox"/> | 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. |
| <input type="checkbox"/> | 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. |
| <input type="checkbox"/> | Translation by an authorized translator of a 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. apostille or double confirmation. |
| <input type="checkbox"/> | 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). |
| <input type="checkbox"/> | Documents on support , confirming secure support during the period of residence. If an applicant is unable to demonstrate independent means of support, the applicant's child may submit data showing secure means of support for the applicant. Information about which documents may demonstrate secure means of support is contained on the website of the Directorate of Immigration, www.utl.is . |
| <input type="checkbox"/> | Birth certificate of the applicants child. Confirmed copy of the original birth certificate of the applicant's child that is residing in Iceland. Note there is a requirement for apostille confirmation or double sealing, if the certificate is issued abroad. The copy must be stamped by the competent authority that is authorized to do so. |
| <input type="checkbox"/> | Confirmed copy or the original translation by an authorized translator of the birth certificate (This applies only to foreign certificates in other languages than English or a Nordic language. Note the requirement for a certification of the translation if it is done by a translator who has not received an authorization as a translator in Iceland, i.e. apostille or double stamp). |
| <input type="checkbox"/> | Application for work permit on grounds of family reunification and an employment contract , (if applicable). An application for a work permit and an employment contract must be submitted in original format and signed by both the applicant and the employer. |
| <input type="checkbox"/> | The applicant has signed the application. |

17. Applicant's checklist for a renewal of a permit

If a renewal of the residence permit is not applied for before the period of validity expires, the application will be processed as if this were an application for a first permit, not renewal.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Photocopy of passport (Personal information page and signature sample). The period of validity shall be at least 90 days in excess of the period of validity of the residence permit. |
| <input type="checkbox"/> | Documents on support , confirming secure support during the period of residence. If an applicant is unable to demonstrate independent means of support, the applicant's child may submit data showing secure means of support for the applicant. Information about which documents may demonstrate secure means of support is contained on the website of the Directorate of Immigration, www.utl.is . |
| <input type="checkbox"/> | The applicant has signed the application. |

18. 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 Icelandic 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, date and applicant's signature

Place

Date of signature (dd.mm.yy)

Applicant's signature

Place, date and applicant's adult child's signature of consent

Place

Date of signature

Applicant's adult child's signature

Who filled out the application?

Applicant

Representative

Another person, who?

Connection to the applicant

To be filled out by the Directorate of Immigration

Dvalarleyfi veitt til

Afgreitt