

Application for renewal of work or residence permit

It is a criminal offence to give substantially incorrect or clearly misleading information, cf. section 47 first paragraph (b) of the immigration Act of 24 June 1988 nr. 64.

<i>The application must be written clearly and must be filled in completely. Please use capital letters.</i>			
1	UDI reference number from previous application:		2
	The application is being submitted at: police district		
3	Personal data: (for personal name use the same style and spelling as in the travel document)		
	Family name:	Nationality:	
	First name:	Don (dd/mm/yy) and national identity number:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
	Middle name:	Place of birth:	
	Previous family name (s) (if any):	Country of birth:	
4	Marital status:		
	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Cohabitant <input type="checkbox"/> Registered partner <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er)		
	Most recent change in marital status occurred:	Date:	Place:
5	Travel document/identity document:		
	Type of document:	Number:	Country:
	Place of issue:	Date of issue (day, month, year):	
	Issued by:	Valid until (day, month, year):	
	Other persons entered in the travel document:		
6	Address in Norway:		
	Street/road, number:	Postal code:	Post office:
	Telephone number:	When did you move to this address:	
7	Reason for residence in / connection to Norway:		
A	If your reason for residence in Norway is one of the following, tick the appropriate box:		
	<input type="checkbox"/> Work (fill in item 7 B) <input type="checkbox"/> Family reunification (fill in item 7 C)		
7	The purpose of the stay is work:		
	Company name/Employer's name:		Employer's registration number:
	Employer's address:		
	<i>If you have more than one occupation, specify in an enclosure.</i>		
	Have you changed employer since your last application or will you be changing employer?: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, the form "Application for a first-time residence permit or work permit" (GP 7028) must be used.
	<i>If no, the employer must fill in the following:</i>		
	What kind of work will the applicant be performing?		
What will be the applicant's pay?		For how long will the applicant be employed?	
Place:	Date:	Signature of employer:	

7 C	The purpose of the stay is family reunification:		
	Is the family relationship still your reason for wanting to stay in Norway? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Family name of principal person:	First name:	
	Address:	Kinship:	
	Telephone number:	Date of birth:	UDI reference number:
<i>In cases of renewal of a permit for family reunification with spouse or cohabitant, documentation, e.g. certificate of residence from Population Registry showing that the parties are still living together, must be enclosed.</i>			
8 A	Family members		
	<i>Children under 18 included in the application</i>		
	Family name:	First name:	Date of birth: UDI reference number:
	Family name:	First name:	Date of birth: UDI reference number:
	Family name:	First name:	Date of birth: UDI reference number:
	Family name:	First name:	Date of birth: UDI reference number:
	Family name:	First name:	Date of birth: UDI reference number:
	Family name:	First name:	Date of birth: UDI reference number:
8 B	Other family members in Norway (spouse, cohabitant, children, parents).		
	Family members that are not listed cannot be claimed on a later occasion.		
	Family name:	First name:	Date of birth:
	Address:		UDI reference number:
	Family name:	First name:	Date of birth:
	Address:		UDI reference number:
	Family name:	First name:	Date of birth:
	Address:		UDI reference number:
9	I hereby confirm that the above information is correct:		
	Place:	Date:	Signature:
	<i>Children under 18 require the signature of both parents or guardian.</i>		
	I/We consent to the applicant being granted a work permit (applies to persons between 15 and 18) <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Place:	Date:	Signature of parent/guardian:
Place:	Date:	Signature of parent/guardian:	
<i>Some of the information provided in this form will be stored in a computerised register. Any person who has submitted information which may be stored has the statutory right of inspection, cf. section 18 of Act no. 31 of 14 April 2000 relating to personal data registers etc. Pursuant to this right you will generally be entitled to know what information has been registered about you.</i>			