

Application for exemption from test requirements for permanent residence permit in Norway

To be filled out by you who apply for permanent residence permit

You are to fill out this form if you apply for permanent residency in Norway and you

- are requesting to be exempt from having to pass a test of spoken Norwegian at the required level due to exceptional health-related factors, or other personal circumstances
- and/or**
- are requesting to be exempt from the social studies test due to health-related factors, or other personal circumstances

You **are not** to fill out this form if you are applying for exemption from the obligation to take Norwegian and/or social studies courses or tests from the municipality.

Supplementary forms

To ensure that we at UDI have all the necessary information to assess your application, we need documentation stating something about your ability to learn Norwegian or to take the tests.

Therefore you must also submit

- [a form to be filled out by healthcare personnel \(/form-health-residence\)](#), and/or
- [a form to be filled out at an institution of education, special needs education or pedagogical-psychological services \(/form-education-residence\)](#)

It is important that you use these forms to ensure that we obtain the exact information we need from healthcare professionals and/or educational institutions etc.

So please fill out this form and get the documentation you need from healthcare professionals and/or educational institution.

Where to submit the form?

You are to hand in the form(s) to the police together with the other documents you submit with your application for permanent residency.

About you

Write your name exactly as it appears in the National Population Register (Folkeregisteret). If you are not registered in the Population Register, you must write your name exactly as it appears in your travel document.

First name

Middle name

Last name

Norwegian national ID number (11 digits)

DUF number (if applicable)

Country of citizenship

Reasons for exemption

I request an exemption from the requirement to have
pass a norwegian oral test at level A2
the social studies test in Norwegian

Reasons for requesting an exemption

Please check the option(s) that apply to you. If you do not have enough space to write in the text boxes here and on the following pages, provide your explanation in a separate document.

Reason(s) why I will not pass the test:

I came to Norway as an adult with little or no education before arriving in Norway.

Write about your schooling, what languages you speak, and whether you can read and write in your native language.

I have not had the opportunity to learn Norwegian or take the test due to my health situation or the health situation of family members under my care.

You must

- attach the [form to be filled out by healthcare personnel \(/form-health-residence\)](#) to document your health situation
- attach relevant documentation from NAV, a doctor and/or the municipality to document the health situation of family members under your care

Briefly describe your own health situation or the health situation of those under your care

I have difficulties reading and/or writing or problems concentrating or learning new things.

If you have

- participated in an Adult Education programme, you must attach a form to be filled out at [an institution of education, special needs education or pedagogical-psychological services \(/form-education-residence\)](#), **or**
- received follow-up from pedagogical-psychological services, a speech therapist or special needs instructor, you must attach a form to be completed by [an institution of education, special needs education or pedagogical-psychological services \(/form-education-residence\)](#) **or**
- been evaluated by and/or received follow-up from a doctor or other healthcare professional, you must attach a form to be filled out by [a doctor or healthcare personnel \(/form-health-residence\)](#)

Briefly describe how these challenges affects your daily life

I am deaf or hearing impaired

If you have

- received follow-up from pedagogical-psychological services, a speech therapist or special needs instructor, you must attach a form to be completed by [an institution of education, special needs education or pedagogical-psychological services \(/form-education-residence\)](#), or
- been evaluated by and/or received follow-up from a doctor or other healthcare professional, you must attach a form to be completed by [a doctor or healthcare personnel \(/form-health-residence\)](#)

Write down whether or not you use a hearing aid, sign language and if you have learned Norwegian sign language

There are other factors preventing me from passing the test.

Write down any other reasons why you are unable to pass the test

Signature

Place

Date

Signature of the applicant