

**CERTIFICATE OF CONTINUATION OF STUDIES FOR THE PURPOSE OF THE GRANTING OF FAMILY BENEFITS**

Reg. 1408/71: Art. 73; Art. 74; Art. 77; Art. 78  
Reg. 574/72: Art. 86; Art. 88; Art. 90; Art. 91; Art. 92

**A. Request for certificate**

To be completed by the institution competent as regards the granting of family benefits. If the form is addressed to a Belgian or Czech institution, an 'E 402 Annex' form should be attached.

<b>1.</b>	Applicant for family benefits			
	<input type="checkbox"/> Employed person			<input type="checkbox"/> Pensioner (scheme for employed persons)
	<input type="checkbox"/> Self-employed person			<input type="checkbox"/> Pensioner (scheme for self-employed persons)
	<input type="checkbox"/> Persons other than the aforementioned			<input type="checkbox"/> Orphan
1.1. Surname <sup>(1a)</sup> .....				
1.2. Forenames ..... Previous names <sup>(1a)</sup> ..... Place of birth <sup>(2)</sup> .....				
1.3. Date of birth ..... Sex ..... Nationality ..... Identification/insurance number <sup>(3)</sup> .....				
1.4. Address <sup>(5)</sup> .....				

<b>2.</b>	Pupil or student			
2.1. Surname <sup>(1a)</sup> .....				
2.2. Forenames ..... Previous names <sup>(1a)</sup> .....				
2.3. Place of birth <sup>(2)</sup> <sup>(4)</sup> ..... Date of birth ..... Identification/insurance number <sup>(3)</sup> .....				
2.4. Address <sup>(5)</sup> .....				
2.5. <input type="checkbox"/> has completed higher education ..... <input type="checkbox"/> has not completed higher education <sup>(11)</sup> .....				

<b>3.</b>	Institution competent as regards granting family benefits			
3.1. Name .....				
3.2. Address <sup>(5)</sup> .....				
3.3. File reference number .....				
3.4. Stamp		3.5. Date		
		.....		
		3.6. Signature		
		.....		



## INSTRUCTIONS

Please complete this form in block letters, writing on the dotted lines only. It should be completed in the language of the establishment named in box 7.

## NOTES

- (<sup>1</sup>) Symbol of the country to which the institution completing the form belongs: BE = Belgium; CZ = Czech Republic; DK = Denmark; DE = Germany; EE = Estonia; GR = Greece; ES = Spain; FR = France; IE = Ireland; IT = Italy; CY = Cyprus, LV = Latvia; LT = Lithuania; LU = Luxembourg; HU = Hungary; MT = Malta; NL = The Netherlands; AT = Austria; PL = Poland; PT = Portugal; SI = Slovenia; SK = Slovakia; FI = Finland; SE = Sweden; UK = United Kingdom; IS = Iceland; LI = Liechtenstein; NO = Norway; CH = Switzerland.
- (<sup>1a</sup>) In the case of Spanish nationals state both names. In the case of Portuguese nationals state all names (forenames, surname, maiden name) in the order of civil status in which they appear on the identity card or passport. In the case of the Czech republic, when family benefits are claimed by a student, persons specified under points 1 and 2 are identical.
- (<sup>2</sup>) In the case of Portuguese districts, state also the parish and the local authority.
- (<sup>3</sup>) Where the form is being sent to a Czech institution, state the birth number; to a Cypriot institution, if a Cypriot national state the Cypriot identification number, if not a Cypriot national state the Alien Registration Certificate (ARC) number; to a Danish institution, indicate the CPR number; to a Finnish institution, indicate the population register number; to a Swedish institution, indicate the personal number (personnummer); to an Icelandic institution, indicate the personal identification number (kennitala); to a Latvian institution, state the identity number; to a Liechtenstein institution, indicate the AHV insurance number; to a Lithuanian institution, state the personal identification number; to a Hungarian institution, state the TAJ (social insurance identification) number; to a Maltese institution, in the case of Maltese nationals, state the identity card number, or, if not a Maltese national, state the Maltese social security number; to a Norwegian institution, indicate the personal identification number (fødselsnummer); to a Belgian institution, indicate the national social security number (NISS); to a German institution of the general pension insurance scheme, indicate the insurance number (VSNR); to a Spanish institution, state the number appearing on the national identity card (DNI), or N.I.E in the case of foreign people, even if the card is out of date; to a Polish institution, state the PESEL and NIP numbers; to a Portuguese institution, indicate also the registration number with the general pensions scheme, if the person concerned has been insured under the social security scheme for civil servants in Portugal; to a Slovak institution, state the birth number; to a Slovene institution, state the personal identification number (EMŠO); to a Swiss institution, state the AVS/AI (AHV/IV) insurance number.
- (<sup>4</sup>) In the case of Swedish nationals information cannot be provided unless stated necessary.
- (<sup>5</sup>) Street, number, post code, town, country.
- (<sup>6</sup>) Please indicate whether it is a publicly maintained school, 'public school', or State-controlled school. To be completed only if the institution shown in box 3 is an institution in the United Kingdom.
- (<sup>6a</sup>) For the purposes of Slovak institutions, please indicate if the study is full-time or part-time.
- (<sup>7</sup>) For the purposes of German institutions, please fill in point 6 if the course involves less than 10 hours a week.
- (<sup>8</sup>) To be completed if the form is to be sent to a Belgian or Finnish institution; the number of half-days is to be indicated in the case of primary and secondary schools.
- (<sup>9</sup>) For the purposes of Netherlands institutions.
- (<sup>10</sup>) For the purposes of Maltese institutions, state whether the child receives some form of remuneration for his or her studies, and state weekly amount.
- (<sup>11</sup>) For the purpose of Slovak institutions please state if the education of second grade has been completed.
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To be completed by the school or the establishment of higher or university education named in box 2 if the claim for family benefits must be submitted to a Belgian or Czech institution.

<b>1.</b>	<p>1.1. Over how many half-days and how many hours a week are the lessons spread?  half-days ..... hours .....</p> <p>1.2. The lessons <input type="checkbox"/> are <input type="checkbox"/> are not given before 7 p.m.</p> <p>1.3. The pupil <input type="checkbox"/> does <input type="checkbox"/> does not attend lessons regularly.  If he/she does not, show the number of days of absence and the reason  .....</p> <p>1.4. The lessons mentioned in 1.1 above  (a) <input type="checkbox"/> include <input type="checkbox"/> do not include  hours of practical training outside the establishment, required for obtaining an official diploma.  If they do, show the gross wage or salary paid or gross allowances granted:  .....  for the period: from ..... to .....</p> <p>(b) <input type="checkbox"/> include <input type="checkbox"/> do not include  hours of practical lessons which take place in the establishment.  If they do, show the number of hours a week .....</p> <p>(c) <input type="checkbox"/> include <input type="checkbox"/> do not include  hours devoted to study in the establishment.  If they do, show the number of hours a week .....</p> <p>1.5. Type of education provided  <input type="checkbox"/> general education <input type="checkbox"/> technical or vocational training <input type="checkbox"/> art education  <input type="checkbox"/> higher non-university education <input type="checkbox"/> university education</p> <p>1.6. The student <input type="checkbox"/> has been preparing <input type="checkbox"/> has not been preparing  a thesis.  If he/she has, indicate  — since when? .....  — when must he/she submit the thesis? .....</p> <p>1.7. The study programme  <input type="checkbox"/> is <input type="checkbox"/> is not recognized by the State  <input type="checkbox"/> corresponds to <input type="checkbox"/> does not correspond to a study programme recognized by the State</p> <p>1.8. Show the periods of holidays  — Christmas holidays: from ..... to .....  — Easter holidays: from ..... to .....  — Summer holidays: from ..... to .....</p>
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<b>2.</b>	<p>School, university or establishment of higher education</p> <p>2.1. Name .....</p> <p>2.2. Address (5) .....</p> <p>2.3. Stamp ..... 2.4. Date .....</p> <p>2.5. Signature .....</p>
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