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## CLARIFICATION OF FAMILY TIES FORM REGARDING OTHER FAMILY MEMBER FOR THE SPONSOR

This form is for you if a member of your family other than your spouse or a child under the age of 18 in your care is applying for the first Finnish residence permit on the basis of family ties. You are a Finnish citizen or a refugee or have been issued a residence permit on the grounds of subsidiary protection or temporary protection. The purpose of the application is to allow you to resume your close family life or the fact that your family member is fully dependent on you. It is further required that denying a residence permit would be deemed unreasonable from your family member's point of view.

Submit this form to the permit authority as an appendix to the application form proper (OLE\_PH5). Enclosing the clarification form with the application proper will make processing of the application quicker.

Carefully fill in and sign the application. Incomplete information will delay the processing of the application and may lead to its rejection.

Read the instructions for filling in the form at [www.migri.fi](http://www.migri.fi).

## SECTION A

<b>1 Information concerning my family member</b>			
1.1 Personal data			
Family name			
First names			
Former names (please give all combinations of first names and family names that you have used previously)			
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Current citizenship(s)			
Former citizenship(s)			
Date of birth (dd.mm.yyyy)		Latter part of Finnish personal identity number (if applicable)	
Country and place of birth			
Occupation and/or training			
Mother tongue			
Marital status			
<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widow(er)
<input type="checkbox"/> Registered partnership between two people of the same gender			

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<b>1.2 Family member's contact information for processing and deciding on the application.</b> If the contact information changes, immediately notify the authority that received the application.	
Street address	
Post code, city/town	Country
Telephone number	E-mail
<b>Contact information in Finland if different from above</b> <b>Address</b> (street address, post code, city/town, country)	
Telephone number	E-mail
<b>Place of transaction and notification abroad.</b> Please state the Finnish mission abroad with which your family member is in contact regarding matters related to this application.	
<b>1.3 Beginning and duration of residence in Finland</b>	
<b>When does your family member intend to move to Finland (dd.mm.yyyy)?</b> . . .	
If the family member is already in Finland, you and he/she must together fill in a response to refusal of entry (form MP_1).	
<b>How long does your family member intend to stay in Finland?</b>	
<b>2 Members of your family member's family</b>	
<b>2.1 Spouse</b> <input type="checkbox"/> No spouse	
First name Family name	Date of birth . . .
	<input type="checkbox"/> Simultaneous application <input type="checkbox"/> Deceased
Citizenship(s)	
<b>2.2 Children</b> <input type="checkbox"/> No children If you are an adult child of your family member, you only need to fill in your details under paragraph 3	
First name Family name	Date of birth . . .
Citizenship(s)	
<input type="checkbox"/> Living in the same country as the family member <input type="checkbox"/> Living in Finland <input type="checkbox"/> Living in a third country. Where? <input type="checkbox"/> Deceased <input type="checkbox"/> Present whereabouts not known	

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First name Family name		Date of birth
. . .		
Citizenship(s)		
<input type="checkbox"/> Living in the same country as the family member <input type="checkbox"/> Living in Finland <input type="checkbox"/> Living in a third country. Where? <input type="checkbox"/> Deceased <input type="checkbox"/> Present whereabouts not known		
First name Family name		Date of birth
. . .		
Citizenship(s)		
<input type="checkbox"/> Living in the same country as the family member <input type="checkbox"/> Living in Finland <input type="checkbox"/> Living in a third country. Where? <input type="checkbox"/> Deceased <input type="checkbox"/> Present whereabouts not known		
Continue in a separate appendix if necessary.		
<b>2.3 Parents</b> (do not fill in if you are an adult child of the family member) If you are a parent of the family member, you only need to fill in your details under paragraph 3		
<b>Information concerning the father</b>		
First name Family name		Date of birth
. . .		
Citizenship(s)		
<input type="checkbox"/> Living in Finland <input type="checkbox"/> Living elsewhere. Where? <input type="checkbox"/> Deceased <input type="checkbox"/> Present whereabouts not known		
<b>Information concerning the mother</b>		
First name Family name		Date of birth
. . .		
Citizenship(s)		
<input type="checkbox"/> Living in Finland <input type="checkbox"/> Living elsewhere. Where? <input type="checkbox"/> Deceased <input type="checkbox"/> Present whereabouts not known		
<b>3 Information concerning sponsor</b>		
Family name		
First names		

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<b>Current citizenship(s)</b>			
<b>Former citizenship(s)</b>			
<b>Date of birth</b> (dd.mm.yy-ID)			
<b>3.1 Your contact information for processing and deciding on the application.</b> If your contact information changes, immediately notify the authority that received your application.			
<b>Street address</b>			
<b>Post code, city/town</b>	<b>Country</b>		
<b>Telephone number</b>	<b>E-mail</b>		
<b>Mother tongue</b>	<b>Transaction language in matters related to this application</b> <input type="checkbox"/> Finnish <input type="checkbox"/> Swedish <input type="checkbox"/> English		
<b>As concerns the family member applying for a residence permit, I am his/her:</b> <input type="checkbox"/> Adult child <input type="checkbox"/> Sibling <input type="checkbox"/> Parent <input type="checkbox"/> Other relative. Please specify.			

## SECTION B

<b>4 Information on family life</b> Please answer the questions in as much detail as possible. Detailed answers help the processing of the application and reduce the need to ask for further clarification.
<b>1. Why is your family member applying for a residence permit for Finland?</b> <input type="checkbox"/> We led a close family life before I moved to Finland and would like to resume our close family life in Finland.  <input type="checkbox"/> The family member has become fully dependent on me, which is why we would like to renew our close family life.
<b>2. Why did your family member not move to Finland together with you?</b>

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**3. Where and with whom is your family member living now?** (Give a detailed report of your family member's living arrangements and conditions in his/her country of residence)

**4. Did you lead a family life in the same household with your family member before you moved to Finland?**

**Yes. When and where?** (Give a detailed report of your living arrangements; the reason for living together, dates, places, whether someone else lived with you, and the reason why you no longer live together)

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No. Why not?

5. How have you kept in touch since you yourself moved to Finland?

6. Do you intend to live together in the same household in Finland?

Yes. Where?

No. Why would you be living apart?

Where and with whom does your family member intend to live in Finland?

7. Why do you feel your family member is fully dependent on you? (Answer this question if you are invoking full dependence in the application)

**Family member's state of health** (Give a report of any illnesses and/or injuries your family member may have and of the grounds on which his/her state of health requires that he/she moves to Finland to be with you. Has your family member been treated for his/her illnesses and/or injuries in his/her country of residence?).

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**Mental dependence** (Give a report of grounds for mental dependence)

**Financial dependence** (Give a report of the family member's financial dependence on you)

**If your family member is not granted a residence permit, what should and could be done to allow your family member to continue living in his/her current country of residence? If you feel that your family member cannot continue living in his/her current country of residence, please provide grounds for why it would be impossible.**

**8. Why would denying a residence permit be unreasonable from the point of view of you and your family member? How would denying a residence permit affect the life of your family member in practice?** (Answer this question if you are applying for a residence permit on the basis of resuming close family life)

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## 5 Means of support

You do not need to fill in the sections about means of support, if the family member residing in Finland is a

- Finnish citizen
- minor who came to Finland without a guardian and was granted a residence permit on the basis of international protection, whose brother or sister under the age of 18 is applying for a residence permit and they have lived together and their parents are no longer alive or their parents' whereabouts are unknown

**The means of support of my family member who is applying for a residence permit in Finland are based on** (if there are multiple sources of income, state all and tick the boxes):

- My employment, the name and contact information of the employer
- My business enterprise, the name and VAT identification number of the company
- Benefits granted by the society to me, which?
- My own assets or the assets of my family member who is applying for a residence permit, which?
- Income from employment or business enterprise(s) of my family member who is applying for a residence permit, which?
- My pension or the pension of my family member who is applying for a residence permit
- Income from the home country or another country paid to my family member who is applying for a residence permit, what?
- Other income, what?

## SECTION C

### 6 Additional information for the application

Here you may state any other facts or additional information that are relevant for your family member's application or coming to Finland. You may enclose a separate appendix if necessary.

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## SECTION D

### 7 Date and signature

I affirm with my signature that the information I submit in this application and its appendices is correct and accurate. I am aware that providing false personal information and false written documentation to the authorities is an act punishable under the Penal Code in Finland and that providing false information may lead to a refusal of a residence permit or the cancelling of an existing permit, repatriation and imposal of a refusal of entry into the Schengen territory.

Place and date

Signature

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Name in block letters

## SECTION E

Any appended documents must be submitted as originals; if they are not in Finnish, Swedish or English, they must be accompanied by a translation into one of these three languages by an authorised translator.

**Appendices** (tick the box and give the title of the appendix as necessary):

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The information you have given on this form will be recorded in the electronic case management system (UMA) of the Finnish Immigration Service. The UMA system is used for processing, decision-making and monitoring of matters governed by the Aliens Act and the Nationality Act. All documents related to the processing of your matter will be filed in the UMA system. More detailed information of the processing on your personal data and your rights related to the processing will be given in the privacy statement of the UMA system. You can read the statement on our website [www.migri.fi/en/registers](http://www.migri.fi/en/registers) or get a paper statement when you submit your application.

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