

27. Sredstava za uzdržavanje/ Means of support	
28. Podatak o zdravstvenom osiguranju/ Information about health insurance	
29. Služenje vojnog roka/Military service	
30. Razdoblje za koje se traži dozvola za boravak i rad/ Period for which the stay and work permit is requested	od: _____ do: _____ from: _____ to: _____

31. Završna izjava:

Final statement:

a) Ovim potvrđujem da su svi podaci navedeni u točkama 1. - 30. potpuni, te da odgovaraju istini i podacima u priloženim dokumentima. Potvrde koje su na drugom jeziku priložene su u hrvatskom prijevodu.

Hereby I confirm that all information given under Items 1. - 30. are complete, that they are true and correspond to the data contained in the documents attached. Certificates in another language are attached in the Croatian translation.

b) Ovim se obvezujem da ću svaku promjenu osobnih podataka prije ulaska u Republiku Hrvatsku, putem diplomatskih misija, odnosno konzularnih ureda Republike Hrvatske, dostaviti hrvatskim nadležnim tijelima.

Hereby I undertake, that I will communicate any change of my personal data to the Croatian competent authorities through diplomatic missions or consular offices of the Republic of Croatia before entering the Republic of Croatia.

c) Potpisivanjem ovog zahtjeva pristajem da se svi moji osobni podaci koji se navode na ovom obrascu mogu proslijediti nadležnim tijelima Republike Hrvatske te dajem suglasnost za provjeravanje i obradu istih, kao i poduzimanje zakonom propisanih postupaka za provođenje odgovarajuće sigurnosne provjere, a u svrhu odlučivanja o ovom zahtjevu.

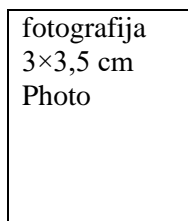
By signing this application form, I agree that all my personal data provided in this form may be forwarded to the competent authorities of the Republic of Croatia. I also give consent that they be verified and processed and that legally prescribed procedures necessary for conducting a relevant security clearance procedure be taken for the purpose of deciding on this application.

d) Primam na znanje da moj zahtjev zbog nepotpunih i netočnih podataka, kao i zbog neispunjavanja točke 31.b i 31.c može biti odbijen.

I take note that my application may be refused on account of incomplete and inaccurate data as well as noncompliance with the Subitems 31.b and 31.c.

U _____, dana _____
In _____ Date:

Potpis podnositelja prijave: _____
Signature of the applicant:



Potpis službene osobe: _____
Signature of the official person:

Popunjava službena osoba kojoj je zahtjev podnesen:

To be filled out by the official person to whom the application was submitted:

Ishod postupka:

Result of the procedure:

Broj rješenja: _____

Number of decision:

Datum izdavanja odobrenja: _____

Date when the approval was issued:

Vrijedi od: _____ do: _____

Valid from: _____ until: _____

Potpis službene osobe: _____

Signature of the official person: