

Insured person:

Social Security no.:

First and last name of your mother / father:

Social security no. and date of birth:

Marital status of your mother / father:

Single, married, widowed, divorced

Telephone number (for any queries):

Please check as appropriate.

1. Is your mother / father primarily supported by you? yes no

2. Does your mother / father have gainful employment in Austria? yes no

Does your mother / father have gainful employment abroad? yes no

Are they subject to compulsory health insurance as a result of this employment? yes no

Since when? When was the last time?

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Name, type of occupation and address of employment:

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3. Is your mother / father self-employed and do they have income which is subject to income tax pursuant to Articles 22 (1-3 and 5) or Article 23 of the Austrian Income Tax Act (*ESStG*)? yes no

Does their income from this activity exceed EUR 5,108.40 annually (or is it expected to exceed this amount)? yes no

If yes, we recommend that your mother / father contacts the Social Insurance Service for Commerce and Industry (*SVA*).

4. Has your mother / father spent at least four consecutive years living together with one or more children at the same address? yes no

5. Is your mother / father in receipt of a pension (retirement pay)? yes no

Since when?

From which authority (e.g. *PVA*)?

How much do they receive monthly? EUR

Where do they have health insurance cover?

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6. Is your mother / father (still) in receipt of another income? yes no

7. Are you in receipt of level 3 care allowance or higher? yes no

If yes, are you cared for by your mother / father? yes no

8. Is your mother / father in receipt of level 3 care allowance or higher? yes no
9. Is your mother / father
- a) an ordinary chamber member of a professional body of doctors? yes no
 - b) a member of a bar association? yes no
 - c) a member of the Austrian Chamber of Pharmacists in the section for self-employed pharmacists? yes no
 - d) a member of the Chamber of Engineers? yes no
 - e) a member of the Austrian Chamber Institute of Patent Agents? yes no
 - f) a member of the Austrian Chamber of Public Accountants? yes no
 - g) a member of the Austrian Chamber of Veterinary Surgeons? yes no
 - h) in receipt of a pension pursuant to the Social Insurance Act for freelance self-employed persons (*FSVG*)? yes no
 - i) in receipt of a pension pursuant to the Social Insurance Act for Persons engaged in Trade and Commerce (*GSVG*) due to a professional certification pursuant to the Public Accountants professional rules? yes no
 - j) in receipt of a survivor's pension pursuant to the Social Insurance Act for Persons engaged in Trade and Commerce (*GSVG*) pursuant to the Public Accountants professional rules? yes no
10. Is your mother / father subject to compulsory insurance pursuant to the Notary Insurance Act (*NVG*) of 1972 or are they in receipt of a pension pursuant to this law? yes no
11. For divorced parents: How much does the divorced husband / wife have to pay / receive in maintenance? EUR yes no
12. Do you have any brothers or sisters? yes no
13. Do your brothers or sisters and / or any other people help to support your parents? yes no
14. Do your parents live with you or do they have their own place of residence? yes no
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15. Do you parents ordinarily live in Austria? yes no
Since when? When did they leave?

Declaration

I hereby confirm that the information provided here is the truth and that I have withheld nothing.

I understand that any services provided unjustly by BVA will be claimed back from the person who was not entitled to receive benefits.

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Date and signature