



Appendix Declaration of intent to undergo a TB test

In order to obtain a residence permit, you (or the person you represent) must be prepared to undergo a tuberculosis (TB) test and - if necessary - treatment. If you submit the completed declaration of intent to undergo a TB test to the IND together with your application (and also meet all other conditions), the IND will grant you a residence permit as soon as possible.

You are granted this permit under the express condition that you will actually undergo a TB test within three months after having received your residence permit. Should it become clear after the issue of a residence permit that - despite signing the declaration of intent - you failed to undergo a TB test within the period of three months, this may result in a cancellation of the permit that was granted.

Enclose the completed and signed declaration of intent with your application before you make an appointment with the Municipal Health Service. In doing so, you declare that you are prepared to undergo a TB test and, if necessary, TB treatment. For the appointment with the Municipal Health Service, you must complete the referral form as much as possible (part 1) and take it with you.

The obligation to undergo the test does not apply if you are a national of one of the countries listed in the appendix 'Exemption from the obligation to undergo a tuberculosis (TB) test'. Nor does the obligation to undergo the test apply if you have an EU residence permit for long-term residents issued by another EU country or are his/her family member and were already admitted to another EU country as a family member of the long-term resident.



1 Details of foreign national to be tested (the applicant)

Write in block letters

1.1 Application for a permit for the purpose of work, learning while working or study?

- ☐ Yes
☐ No

1.2 V-number (if known)

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1.3 Name
(as stated in the passport)

Surname

First names

1.4 Sex

- ☐ Male
☐ Female

1.5 Date of birth

<i>Day</i>		<i>Month</i>		<i>Year</i>		

1.6 Place of birth

1.7 Country of birth
(as stated in the passport)

1.8 Nationality

1.9 Civil status

- ☐ unmarried (single or living together)
☐ married
☐ registered partnership
☐ divorced
☐ widow/widower

1.10 Home address

Street

Number

Postcode

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Town

1.11 Details passport

Number

Country

Valid from (date)	Day			Month			Year			

To (date)	Day			Month			Year			

1.12.1 Do you have a spouse or
(registered) partner?

- ☐ No
 > Go to 2 'Signing'
- ☐ Spouse
 > Please complete the requested details below
- ☐ Registered) partner
 > Please complete the requested details below

1.12.2 Name
(as stated in the passport)

Surname

First names

1.12.3 Seks

- ☐ Male
- ☐ Female

1.12.4 Nationality

1.12.5 Home address

Street

Number

Postcode

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Town

2 Signing

- ✓ I hereby declare that I am prepared to cooperate in a tuberculosis test and any treatment.
- ✓ I am aware of the fact that I must undergo a TB test within three months after the residence permit has been received. If I fail to do so, this might have consequences for my right of residence in the Netherlands.

2.1 Name of foreign national

2.2 Place and date

Place

Day		Month		Year			

2.3 Signature of foreign national

2.4 Name in case of legal representative

2.5 Place and date

Place

Day		Month		Year			

2.6 Signature of legal representative

Processing of personal data

The IND records your data in the IND systems to be able to carry out legal tasks. The IND uses and secures your personal data carefully and on the basis of the requirements of the privacy legislation. Read [how the IND handles your personal data](https://ind.nl/en/privacy) on ind.nl/en/privacy.