



Registration form for EU/EFTA nations

We ask you **to send** the completed registration form including attachments within 14 days to
Einwohnerdienste der Stadt Bern, Predigergasse 5, 3001 Bern.

General informations

First name and surname _____

Maiden name _____

AHV-number _____

Date and place of birth _____

Fathers name and surname _____

Mothers name and surname _____

Religion _____

Civil status and date (when married or divorced) _____

Date of arrival _____

Residence before arrival _____

Address in the city of Bern
(incl. room number) _____

Floor _____

Number of rooms _____

Location left center right

Name and address of the
landlord or property management _____

Phone number (by questions) _____

Living

Own appartement yes no

Together with _____

Sublease with (name) _____

Activity/study

Profession / student _____

Employer _____

Start work on (date) _____

Family

when married/registered partner, please note your partners: name, surname, birthdate and living address

Maiden name _____

First Name _____

Birth date _____

Nationality _____

Residence partner _____

Residence children _____

Contact details

E-Mail / phone number _____

Date: _____

Signature: _____

Enclosures documents

Study:

- „Gesuch Aufenthaltsbewilligung infolge Aus- und Weiterbildung“
- „Financial resources“
- copy rental contract (can be requested if necessary)

Family reunification:

- “Familiennachzugsgesuch”