-THIS PAGE IS NOT PART OF THE APPLICATION FORM-

INSTRUCTIONS

- 1) Fill in the form and print the form
- 2) Send the form to the right address

Send form to the right Swedish consulate:

Online address list of Swedish consulates:

http://www.swedenabroad.com/

Important postal addresses:

INDIA:

Consulate General of Sweden, 3 Flr, C - 53, TCG Financial Centre G - Block, BKC, Bandra (E), Mumbai - 400051, Maharashtra India

IRAN:

Embassy of Sweden, P.O. Box 19575-458, Tehran Iran

RUSSIA:

Sweden Embassy of Russia, Moscow, 119590, 60 Mosphilmovskaya str. Russia

SAUDI ARABIA

Embassy of Sweden, P.O. Box 94382, Riyadh 11693 Saudi Arabia

UNITED STATES OF AMERICA

Consulate General of Sweden, 445 Park Avenue, 19th floor, New York, NY 10022

UKRAINE:

Embassy of Sweden, Ivana Franka Street 34/33, 3rd floor, 01901 Kiev Ukraine

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Received from Swedish mission abroad

Received from the Swedish Migration Agency

Application for an EU Blue Card for work in Sweden

 for applicants currently outside Sweden

To be filled out by the Swedish Migration Agency/Swedish mission abroad		
Dossier number	Signature	

Read this first!

Use this form if you are currently outside Sweden when applying for an EU Blue Card for work in Sweden, and are a citizen of a country outside the EU/EEA area or Switzerland.

In order to obtain an EU Blue Card, you must have an employment contract or an offer of highly qualified employment for one year. Your salary shall be at least one and a half times the Swedish average salary, and you must be able to show that you have the university/college education or work experience required for the position. You must also have taken out or applied for health insurance.

The Swedish Migration Agency will charge an application fee for the administration of this application.

In general, you will have to apply for and be granted a permit before travelling to Sweden. Submit your application at a Swedish embassy or consulate general.

If you provide all the information in your form and include all the required documents, you will receive your decision sooner than if we have to ask you for supplementary information.

More information about the EU Blue Card and the salary threshold can be found at www.migrationsverket.se

☐ I am applying for	an EU Blue Card in	order to	work in Swe	den a	s
	(۱	please state	occupation)		(CE)
☐ I have an EU Blue Card in Sweden and I wish to extend it to work as					
	(۱	please state	occupation)		(CEX, CEAX)
☐ I have an EU Blue Card in another EU country and now I am applying for an EU Blue Card in Sweden to work as					
	(۱	please state	occupation)		(CEA)
I am planning to work in Sweden from (YYYY-MM-DD) up to and I am planning to enter Sweden on					
If I cannot get an EU Blue Card, I would like the Migration Agency to Yes No consider my application according to the normal rules for work permits.					
☐ I have taken out or have applied for health insurance for the first three months in Sweden. My insurance company is					
Personal details					
Last name (family name)			Previous last name		
First name (all)	Is a relative applying for a residence permit together with you? No Yes (co-applicants must submit their own a		· ·		
Gender Date of Man Woman	birth (YYYY-MM-DD)	Place of birt	h	Country	of birth
Citizenship	Previous citizenship		Native language		Other languages
Civil status					

Divorced

Married (including domestic partner)

Cohabitant

Widow/widower

Single

Passport information			
□ National passport □ Other passport (state which type)	e)		Passport number
Passport issued by	Date		Valid until
I have a permit to live (reside) in a country other than my home country	from – to		
☐ No ☐ Yes, country:			
Contact details			
Your address in the country where you live			
	1		
E-mail address	Telephone nu	umber	
Any planned address in Sweden			
,			
Previous applications for permits in Sweden Have you previously applied to enter Sweden?			
No ☐ Yes, in the year			
□ No □ Tes, in the year			
Previous visits to Sweden and other Schenge	n countri	i es (the most re	ecent one first)
1. Country and length of stay (from, up to)	2. Country an	d length of stay (fron	n, up to)
Country and length of stay (from, up to)			
3. Country and rength of stay (norm, up to)	4. Country and length of stay (from, up to)		
Husband's/wife's/cohabitant's personal detail			submit their own application)
Last name (family name)	Previous last	name	
First name (all)	Gender Date of birth (year, month, date of birth (year, month) (year, mo		Date of birth (year, month, day)
, ,	☐ Man ☐ Woman		
Citizenship	Previous citizenship		
Current address (street, city and country)			
Children's personal details (All co-applicants mus	st submit tl	heir own applic	ation)
Last name (family name), first name		Date of birth	Citizenship

Important! Husbands/wives/cohabitants and children are to use the form "Application for permit for family members of workers/visiting scholars/athletes and self-employed persons" MIGR 132011

Work in Sweden

Employer in Sweden						
Contact person at the employer/elient						
Contact person at the employer/clief	act person at the employer/client E-mail address					
Street address	<u> </u>			Telephone n	Telephone number	
Postcode	Postal address			Telefax		
Workplace address (if different)						
Describe your work assignments						
, ,						
From which employer (in Sweden or	abroad) will you receive your salary	?				
How much will you receive in salary	(before taxes) each month?	How many	hours will you be wor	king per week?		
Will you receive any other compensa	ation/allowances?	If yes, plea	ase state the monthly a	amount		
□ No □ Yes						
Which insurances have your employ			uranaa 🗆 Danaiar	ingurance		
Healthcare insurance How did you learn about the work in	No-fault liability insurance] Life inst	urance Pensior	1 insurance		
Then did you loan about the month.						
Previous work in Swe	nden.					
Employer				t (from – to)		
Reason for ending employment						
Provious studies and	work experience					
Previous studies and School education up to and including				Number of years	Graduated in the year	
	•				,	
University/college education (state th	ne level)					
Vocational education						
Previous employers			Work as		Length of	
, ,					employment	
			1			
Other information you	ı wish to submit regar	ding yo	our applicatio	n		
Other information you	ı wish to submit regar	ding yo	our applicatio	n		
Other information you	ı wish to submit regar	ding yo	our applicatio	n		
Other information you	ı wish to submit regar	ding yo	our applicatio	n		

The decision should be sent to			
Please state which Swedish embassy or consulate-general we should send it to			
Signature			
I assure that the information I have provide is correct.			
Date and location Signature			
Documents that you are to send with your application			
Offer of employment (<u>www.migrationsverket.se</u>).			
Opinion from relevant union (<u>www.migrationsverket.se</u>).			
A copy of your passport that shows your identity, the passport's period of validity and any residence permits for countries outside your home country.			
Degree certificate or extract from the records from your university.			
Statement of employment from relevant previous employers.			
You must also include the following documents if you			
are applying for an extension			
Statement of income for the previous year, if you worked in Sweden at that time.			
Payslips for this year if you are currently working in Sweden.			
Certificate of employment from your employer, with information about your employment in Sweden (if you have had a work permit in Sweden for nearly four years.)			
have an EU Blue Card in another EU country and are applying for a Blue Card in Sweden.			
Copies of current EU Blue Card.			