

# Joint Declaration

## Social Assistance Board

Required in case of a request from the dependent on a Person Responsible for Household  
 Attach this form with the Social Assistance Application

### Joint Declaration

The Applicant is making this request because the **Person Responsible for Household** has not been registered for work under Part 1 of the Register from (DD/MM/YYYY) \_\_ / \_\_ / \_\_\_\_ since he / she:

- Left work voluntarily
- Failed to attend a course / interview by **Jobsplus**
- Was expelled from work (Dismissal)
- Refused a job offer by **Jobsplus**
- Had employment terminated due to a medical condition

The **Person Responsible for Household** appealed / did not appeal to the National Employment Authority (NEA) because of:

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### The Dependent on the Person Responsible for Household Details

Identity Card Number: *	_____	Title: *	_____
Name: *	_____	Surname: *	_____
Relation to the Person Responsible for Household: *	_____		
Contact Number: *	_____	Email:	_____

_____	_____
Signature	Date

### Person Responsible for Household Details

Identity Card Number: *	_____	Title: *	_____
Name: *	_____	Surname: *	_____
Relation to Dependent: *	_____		
Contact Number: *	_____	Email:	_____

_____	_____
Signature	Date