

Application form for Personal Public Service Number

(for child aged under 18)

Social Welfare Services

REG 1M

Data Classification R



Part 1

Child's details

1. **Title:** (insert an 'X' or specify) Mr. Mrs. Ms. Other
2. **Surname:**
3. **First name(s):**
4. **First name as it appears on the birth certificate:**
5. **Birth surname:**
6. **Mother's birth surname:**
7. **Date of birth:**
D D M M Y Y Y Y
8. **Please state the reason why a PPS Number is required:**
9. **Country of nationality:**
10. **Country of birth:**
11. **If born in the Republic of Ireland, county of birth:**
12. **Name of the most recent country (before the Republic of Ireland) where the child was educated, registered or receiving a benefit payment or allowance:**
13. **Child's social security, personal or registration number in that country:**
14. **Where the child previously lived in Ireland, please state the address at that time:**

Declaration by Parent, Foster Parent, Guardian or School's Nominee

I declare that the information given by me on this form is truthful and complete. I understand that if any of the information I provide is untrue or misleading I may be prosecuted.

Signature (not block letters)

Date:
D D M M Y Y Y Y

Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.

