# ANEXA nr. 1

la Normele metodologice

CERERE

pentru acordarea alocație de stat pentru copii

Subsemnata(ul),

Numele şi prenumele

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Actul de identitate 1) Seria Eliberat de secția de poliție

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# Vă rog să-mi aprobați acordarea alocației de stat pentru copilul:

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| 1. Numele şi prenumele | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Actul de identitate/act doveditor 1) Seria Nr. | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |
| reprezentat legal de subsemnatul în calitate de\* : | | | | | | | | | | | | | | | | | | | | | | | |
| părinte natural | | | | | | | | | | | | | |  |  | | | | | | | | |
| părinte adoptiv | | | | | | | | | | | | | |  |
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| curator | | | | | | | | | | | | | |  |
| persoană/familie de plasament | | | | | | | | | | | | | |  |
| asistent maternal | | | | | | | | | | | | | |  |
| persoană căreia i s-a încredințat copilul în vederea adopției | | | | | | | | | | | | | |  |
| Copilul este încadrat într-un grad de handicap Da Nu | | | | | | | | | | | | | | | | | | | | | | | |
| Conform certificatului de încadrare într-un grad de handicap nr. | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
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\* se bifează cu „X” căsuța corespunzătoare

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| reprezentat legal de subsemnatul în calitate de\* : | | | | | | | | | | | | | | | | | | | | | | | |
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| persoană/familie de plasament | | | | | | | | | | | | | |  |
| asistent maternal | | | | | | | | | | | | | |  |
| persoană căreia i s-a încredințat copilul în vederea adopției | | | | | | | | | | | | | |  |
| Copilul este încadrat într-un grad de handicap Da Nu | | | | | | | | | | | | | | | | | | | | | | | |
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| 3. Numele şi prenumele | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| reprezentat legal de subsemnatul în calitate de\* : | | | | | | | | | | | | | | | | | | | | | | | |
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| persoană căreia i s-a încredințat copilul în vederea adopției | | | | | | | | | | | | | |  |
| Copilul este încadrat într-un grad de handicap Da Nu | | | | | | | | | | | | | | | | | | | | | | | |
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| 4. Numele şi prenumele | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| persoană căreia i s-a încredințat copilul în vederea adopției | | | | | | | | | | | | | |  |
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* se bifează cu „X” căsuța corespunzătoare

# La prezenta, anexez următoarele documente\*:

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| copia certificatului de naştere al copilului |  |
| copia actului de identitate al reprezentantului legal |  |
| livretul de familie |  |
| hotărârea judecătorească de încredințare a copilului în caz de divorț |  |
| hotărârea judecătorească de încredințare în vederea adooției |  |
| hotărârea judecătorească de încuviințare a adopției |  |
| hotărârea judecătorească sau, după caz, hotărârea comisiei pentru protecția copilului pentru măsura de protecție specială a  plasamentului |  |
| dispoziția directorului general/directorului executiv al direcției generale de asistență socială şi protecția copilului sau, după caz,  hotărârea judecătorească pentru măsura de protecție specială a plasamentului în regim de urgență |  |
| hotărârea judecătorească de instituire a tutelei sau, după caz, dispoziția autorității tutelare emisă până la 31 decembrie 2004 |  |
| dispoziția autorității tutelare de instituire a curatelei |  |
| actul de deces al unuia dintre părinți |  |
| certificatul de încadrare a copilului într-un grad de handicap, în situația în care copilul este declarat cu handicap |  |

* se bifează cu „X” căsuța corespunzătoare

# Doresc să primesc aceste drepturi:

* la domiciliu prin mandat poştal\*
* în cont personal\* Nr.

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Deschis la banca

* în cont de card\* Nr.

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Deschis la banca

* se bifează cu „X” căsuța corespunzătoare

# Anexez alăturat extrasul de cont de la deschiderea acestuia. Celălalt părinte (se completează dacă există):

Numele şi prenumele

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Cod numeric personal Adresa: Str.

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Nr. Bl. Sc. Ap.

Localitatea Județul

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Sector

Actul de identitate Seria

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Eliberat de secția de poliție

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Nr.

Mă oblig să aduc la cunoştința direcției de muncă şi protecție socială orice modificare intervenită în situația copilului, care poate conduce la încetarea dreptului la alocația de stat pentru copii, în termen de 15 zile de la data modificării.

Prin semnarea prezentei am luat la cunoştință că cele declarate sunt corecte şi complete, iar declararea necorespunzătoare a adevărului se pedepseşte conform legii penale.

Prin prezenta cerere sunteți informat că datele cu caracter personal sunt prelucrate în scopul și pentru îndeplinirea atribuțiilor legale ale instituției.

Am luat la cunoștință că informațiile din prezenta cerere și din actele atașate la aceasta, vor fi prelucrate de DAS Buzau si AJPIS Buzau cu respectarea prevederilor Regulamentului (UE) 2016/679 privind protecția persoanelor fizice în ceea ce privește prelucrarea datelor cu caracter personal și libera circulație a acestor date.

Data Semnătura solicitantului

Semnătura celuilalt părinte