

IMPORTANT: This English translation is only provided to aid your understanding and does not have legal effect. Please only fill in and sign the German version. Only the German version is legally binding.

Please send this form to:

- The responsible statutory health insurance provider if the employee is covered by statutory health insurance. This applies regardless of insurance membership status (compulsory membership (*Pflichtversicherung*), voluntary membership (*freiwillige Versicherung*) or family insurance (*Familienversicherung*)).
- The responsible statutory pension insurance provider if the employee is not covered by statutory health insurance (*Deutsche Rentenversicherung* (state pension provider – *DRV Bund*), *Knappschaft Bahn-See* (occupational pension fund for sailors and railway workers) or the responsible regional *DRV* provider).
- The *Arbeitsgemeinschaft Berufsständischer Versorgungseinrichtungen e.V.* (Association of Occupational Pension Schemes – *ABV*), Postfach 080254, 10002 Berlin if the employee is not covered by statutory health insurance and has a pension plan with an occupational pension provider.

Posting of an employee with *Beamte* (public servant) status or an equivalent status ¹⁾ in one or more other member states ²⁾

– article 11 (3) point b) of Regulation (EC) No 883/2004 –

Questionnaire for issuing a “certificate of applicable legislation” (form A1)

1. Personal details			
Gender	<input type="checkbox"/> male	<input type="checkbox"/> female	<input type="checkbox"/> unknown <input type="checkbox"/> other
Surname	Given name	Title	
Birth name	Date of birth		
Place of birth	Country of birth	Nationality:	
German social security number (<i>Rentenversicherungsnummer</i>)			
Address in country of residence:			
Street and house number			
Postal code and town/city		Country	
Address in country of employment (if any):			
Street and house number			
Postal code and town/city		Membership number	
Please complete this additional section if the questionnaire is to be sent to a statutory pension insurance provider or to the ABV:			
The person mentioned above is covered by <input type="checkbox"/> statutory <input type="checkbox"/> private health insurance			
Please note: If there is private health insurance coverage in addition to statutory health insurance coverage, only the statutory insurance should be listed here.			
Name of the responsible occupational pension provider			
Street and house number			
Postal code and town/city		Membership number	

¹⁾ This includes

- employees of the federal government, the federal states, the municipalities, associations of municipalities (*Gemeindeverband*),
- employees of organisations under public law or their associations, and
- members of the German parliament

if their social security coverage was subject to German legislation immediately prior to their posting in another member state.

²⁾ “Member states” are the states within the European Union, as well as Iceland, Liechtenstein, Norway and Switzerland.

2. Details of employer

Name of organisation

Street and house number

Postal code and town/city Country

Betriebsnummer (company number issued by the Federal Employment Agency)
.....

Contact details for further questions ³⁾

Name of contact Telephone number E-mail

3. Details on *Beamte* status and employment

During their posting, the person mentioned in part 1 is also working for another employer or self-employed: yes ⁴⁾ no

a.) Details on *Beamte* status:

The *Beamte* status remains unchanged during the service abroad yes no

The duration of the posting abroad has been approved as a period of leave by the employer yes no

If yes: The leave was justified on the basis of official business and is recognised as a pensionable period of service yes no

b) Details on employment

The employment in Germany remains unchanged during the posting abroad yes no

The employee's social security coverage was subject to German legislation immediately prior to their posting yes no

4. Details on posting abroad

1. Place of posting from to

Name of organisation

Street and house number

Postal code and town/city Country

2. Place of posting from to

Name of organisation

Street and house number

Postal code and town/city Country

³⁾ Voluntary information

⁴⁾ If there is an additional employment relationship (including self-employment) besides public service in another member state, this employment is generally also covered by German legislation (see article 12 (4) of the Regulation (EC) No 883/2004). If there are additional employment relationships and if the employee's principal residence is located in Germany, please contact the National Association of Statutory Health Insurance Funds, DVKA (German liaison office for health insurance abroad) in order to be issued the A1 form.

3. Place of posting

from to

Name of organisation

Street and house number

Postal code and town/city Country

In the following member states without fixed place of posting:

From to

Countries

5. Public employer's declaration

We explicitly confirm that all the information given above is accurate.

We are aware that the responsible authorities, both from Germany as well as from the country where the employment takes place, can review this information and that (even inadvertently) providing incorrect information can cause the A1 form to be revoked, meaning that the employee's social security will become subject to the legislation of the country where the employment takes place.

This will also apply retroactively.

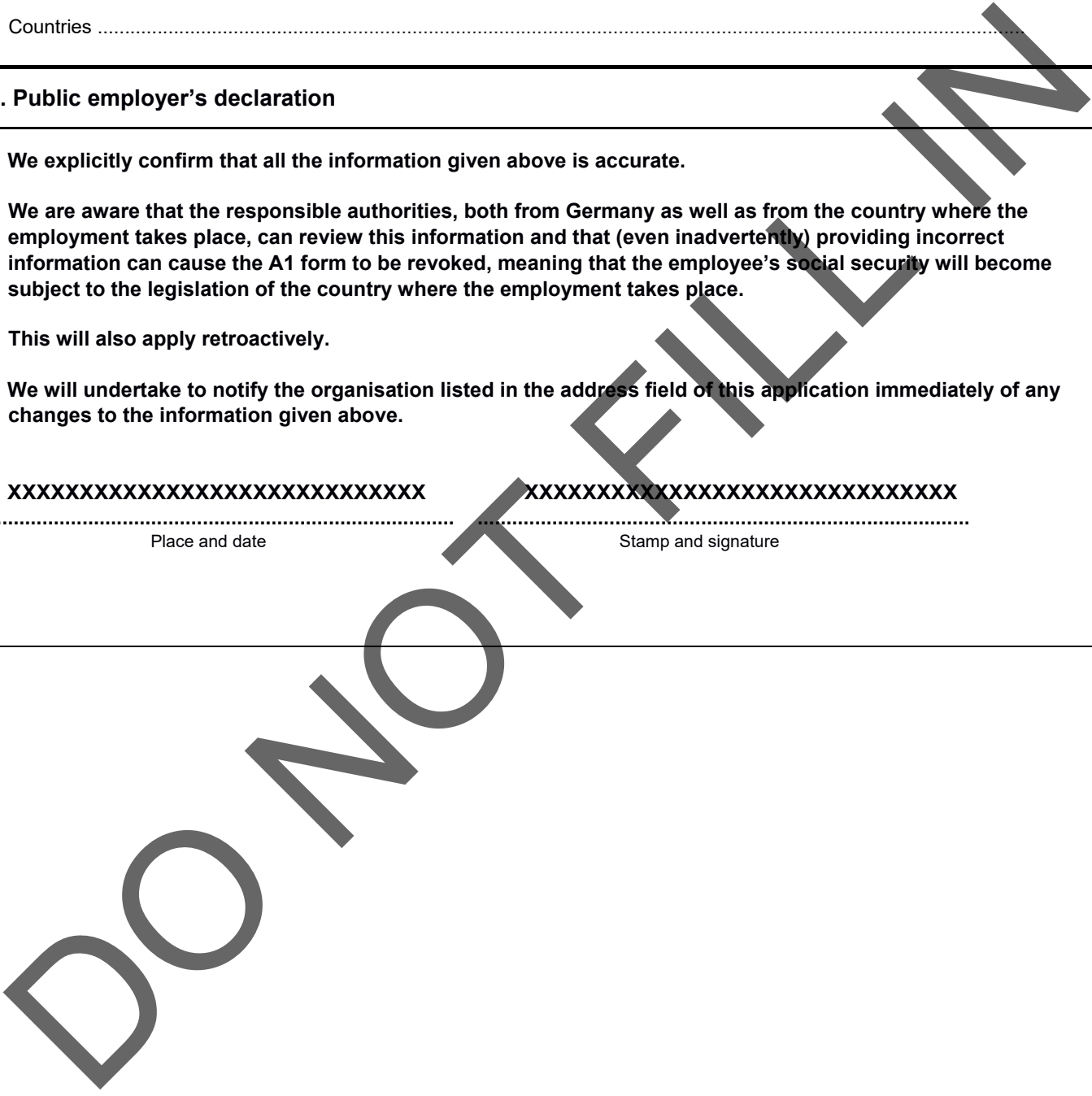
We will undertake to notify the organisation listed in the address field of this application immediately of any changes to the information given above.

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

.....
Place and date

.....
Stamp and signature



Information on data protection:

Data is collected in order for the statutory health insurance provider, the statutory pension insurance provider or the *Arbeitsgemeinschaft Berufsständischer Versorgungseinrichtungen e.V.* (German association of occupational pension providers) to fulfil their statutory obligations.

Data is collected, stored electronically and only processed in accordance with the regulations for data protection.