

IBAS – Check



We would be happy to advise you on the recognition of your qualifications. In order to provide good advice, we need this personal information from you. **Important: This is not an application for recognition!**

Family name: _____ Gender: m w d

First name: _____ Year of birth: _____

Current place of residence (town/country): _____

Email: _____ Telephone: _____

Country of birth: _____ Nationality: _____

I have been living in Germany since (year/month): _____ I (still) live abroad.

What job or field do you want to work in? What do you need recognition for?

Professional qualification	degree/certificate 1		degree/certificate 2	
<i>(Please list all professional qualification/ diplomas, e.g. Bachelor and Master)</i>	<input type="checkbox"/> school leaving certificate	<input type="checkbox"/> vocational training	<input type="checkbox"/> school leaving certificate	<input type="checkbox"/> vocational training
	<input type="checkbox"/> academic studies		<input type="checkbox"/> academic studies	
issued in country				
name of institution/university, city				
name of degree/ certificate in original language (specialization/profession)				
name of degree/ certificate in in German or English				
How long did you study (in years)?				
year of graduation				
experience in this profession (with this degree/ certificate)	in Germany: <input type="checkbox"/> yes <input type="checkbox"/> no	not in Germany: <input type="checkbox"/> yes <input type="checkbox"/> no	in Germany: <input type="checkbox"/> yes <input type="checkbox"/> no	not in Germany: <input type="checkbox"/> yes <input type="checkbox"/> no
	years:	years:	years:	years:

Have you previously submitted an application for recognition?

no or: yes, application for recognition at _____ yes, application at ZAB

If yes: What was the result? recognition: with additional requirements partially equivalent rejection
 positive ZAB statement of comparability rejection of ZAB procedure not yet completed

Are you employed? (current occupational situation/ status of employment)

- yes, in Germany no, but I'm in training (also language course or internship)
 yes, abroad no

If yes, in Germany: What type of work is it?

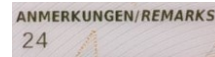
- employed (also *Freiwilligendienst*) mini job (up to 520€) self-employed

Are you registered with the employment agency, the job center or the social welfare office (Sozialamt)?

- yes, Jobcenter yes, Sozialamt
 yes, Agentur für Arbeit no

If yes: Do you get money from this agency (Leistungsbezug)? yes no

What is your residence permit (paragraph)? *[You find the § in your German identity card/residence permit under "Anmerkungen/Remarks"]:*



- | | |
|--|---|
| <input type="checkbox"/> no residence permit, as living abroad | |
| <input type="checkbox"/> German or citizen in EU/EEA/Switzerland | <i>refugee/asylum seeker:</i> |
| <input type="checkbox"/> permanent residence permit: § 9, 9a, 18c AufenthG | <input type="checkbox"/> recognized refugee: § 22-26, 104a, 104b AufenthG |
| <input type="checkbox"/> for family reasons: § 27-36 AufenthG | <input type="checkbox"/> <i>Duldung</i> : § 60-60d AufenthG |
| <input type="checkbox"/> employment: § 18-21 AufenthG | <input type="checkbox"/> <i>Aufenthalts gestattet</i> : § 55 Abs. 1 AsylG |
| <input type="checkbox"/> education/training: § 16-17 AufenthG | <input type="checkbox"/> Ankunfts nachweis: § 63a AsylG |
| <input type="checkbox"/> Others: _____ : § _____ AufenthG | |

Do you speak German?

- yes, as native language yes, as foreign language no

If yes, as foreign language: Do you have a German language certificate? yes, level: _____ no

How did you find out about IBAS consultation? Who referred you to us?

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Agentur für Arbeit | <input type="checkbox"/> migration counselling | <input type="checkbox"/> recognition agency | <input type="checkbox"/> Ausländerbehörde |
| <input type="checkbox"/> Job center | <input type="checkbox"/> friends/family/community | <input type="checkbox"/> training provider | <input type="checkbox"/> internet |
| <input type="checkbox"/> employer/company | <input type="checkbox"/> Others: (Please name.) _____ | | |

Here you can add more information:

Notes IBAS:

IBAS Dresden/ IBAS Leipzig: anerkennung@exis.de * IBAS Chemnitz: ibas-chemnitz@sfrev.de * www.anerkennung-sachsen.de

Hinweise, Wünsche oder Kritik richten Sie an EXIS Europa e.V. (Träger von IBAS Dresden, IBAS Leipzig) über post@exis.de, 0375/ 390 93 65 oder an den Sächsischen Flüchtlingsrat e.V. (Träger IBAS Chemnitz) über geschaeftsstelle@sfrev.de. **10/2024**