



Place of business	Line of business
Self-employment activity pursuance from _____ to _____	
Number of Trade Register _____	

**4. INDICATE THE STATE FOR WHICH THE PORTABLE DOCUMENT PDU1 IS ISSUED**

--

**5. DELIVERY ADDRESS**

--

**6. PLACE, DATE AND SIGNATURE**

--

The application for issuing the portable document PD U1 has to be sent via the post to the address of the relevant Branch Office of the Social Insurance Agency\*\*, i.e. the Branch Office according to the last gainful activity of the claimant in the Slovak Republic / voluntary unemployment insurance of the claimant in the Slovak Republic / place of permanent stay of the claimant in the Slovak Republic, or electronically to the email address of the relevant Branch Office of the Social Insurance Agency\*\*, or it can be requested personally at this Branch Office.

\* The portable document PD U1 serve in compliance with coordination regulations to prove completed unemployment insurance periods, periods of employment and periods of self-employment activity as well as to prove other facts relevant for the unemployment benefit claim which were completed in another EU Member State.

\*\*Contact details of the relevant Branch office of the Social Insurance Agency are available at:

<http://www.socpoist.sk/kontakty--xly/48023s>

<https://www.socpoist.sk/forms/66018s>