



OASI/DI Membership Form

Personal details

N° AVS 756.

Date of birth

Forename(s) / Surname(s)

Single married / separated registered partnership divorced widowed

Do you have Swiss nationality?

Yes → Since

No → Nationality

Preferred correspondence language

English German French Italian Spanish

Preferred language for decisions

German

French

Italian

Address of residence abroad

c/o

Road/PO Box

Post Code

Town/City

Country

Email(*)

(*) By indicating my address, I agree to receive the correspondence by e-mail.

Situation abroad

In gainful employment

without gainful employment

Since when have you been living abroad?

Students

Name of institution/school

Start / End of studies

from

until

Please provide a study certificate stating the start date and duration of the studies.

Previous situation

Until which date were you subject to the compulsory OASI/DI?

Home address for the past 5 years

Post Code	Town/City	From	Until

Please provide a copy of the relevant residency certificates.

Employers during the past 5 years

Name of enterprise	From	Until

Please provide a copy of your last annual salary certificate.

Partner

N° AVS 756.

Date of birth

Surname(s) / Forename(s)

Nationality

In gainful employment

without gainful employment

Student

Membership is granted on an individual basis and is not automatically granted to partners or children. Each member of the family must therefore submit a separate application form if they wish to join.

Place and date

Signature(*)

(*) A membership form presented by a minor, is only valid with the consent and signature of their legal representative.