

Application for Schengen visa

This application form is free

РНОТО

							For official use only
1. Surname (Family name) (x)							Date of application:
2. Surname at birth (Former family name(s)) (x)							Date of application:
- Summer at order manny mane (s)) (a)							Visa application number :
3. First name(s) (Given name(s)) (x)							
	Place of birth: 7. Current nationality:					File handled by :	
(day-month-year) 6. Co	untry of birth : Nationality at birth, if different				rent: :	Application lodged at:	
8. Sex	9. Marital Status					□ Embassy/consulate □ CAC	
☐ Male ☐ Female	☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widow(er) ☐ Other (please specify)					ow(er)	□ Service provider □ Commercial intermediary
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental							□ Border
authority/legal guardian							Name :
							□ Other
11. National identity number, where applicable :							Supporting documents :
12. Type of travel document Ordinary passport Diplomatic passport Service passport Official passport Special passport							☐ Travel document
Other travel document (please specify):							☐ Means of subsistence ☐ Invitation
13. Travel document number	avel document number 14. Date of issue 15. Valid until 16. Issue			16. Issued by		☐ Means of transport	
							□ TMI □ Other:
17. Applicant's home address and e-mail address Telephone number(s)							
							Visa decision:
							□ Refused
10 P :1 :							□ Issued : □ A
18. Residence in a country other than the country of current nationality ☐ No ☐ Yes: Residence permit or equivalent N°						□ C □ LTV	
* 19. Current occupation						□ Valid :	
* 20. Employer and employer's address and telephone number. For students, name and address of educational						From	
establishment.							Until
							Number of entries : □ 1 □ 2 □ Multiple
21. Main purpose(s) of the journey:							Number of days:
☐ Tourism ☐ Business ☐ Visiting	_	_	-		ial visit Study		Trumber of days
☐ Medical reasons ☐ Transit ☐ Airport transit ☐ Other (please specify): 22. Member State(s) of destination 23. Member State of first entry							
2. Member State of first entry							
24. Number of entries requested 25 Duration of the intended stay or transit				ransit			
☐ Single entry ☐ Two entries ☐ Multiple entries ☐ Indicate number of days :							
26. Schengen visas issued during the past three years ☐ No							
☐ Yes. Date(s) of validity/							
27. Fingerprints collected previously for the purpose of applying for a Schengen visa							
□ No □ Yes. Date, if known:							
28. Entry permit for the final country of destination, where applicable Issued byuntiluntil							

^{*} The fields marked with * do not need to be filled in by family members of EU, EEA or CH citizens (spouse, child or dependent ascendant) while exercising their right to free movement. Family members of EU, EEA or CH citizens shall present documents to prove this relationship and fill in fields no 34 and 35.

29. Intended date of arrival in the Schengen area	30. Intended date of departure from the Schengen area						
* 31. Surname and first name of the inviting person(s) in the Member State(s). If not applicable, name of hotel(s) or temporary accommodation(s) in the Member State(s)							
Address and e-mail address of inviting person(s)/hotel(s)/temporary ad	ecommodation(s)	Telephone and telefax					
* 32. Name and address of inviting company/organisation		Telephone and telefax of company/organisation					
Surname, first name, address, telephone, telefax, and e-mail address of contact person in company/organisation							
* 33. Cost of travelling and living during the applicant's stay is covered							
□ by the applicant himself/herself Means of support □ Cash □ Traveller's cheques □ Credit card □ Pre-paid accommodation □ Pre-paid transport □ Other (please specify):	□ by a sponsor (host, company, organisation), Please specify □ referred to in field 31or 32 □ other (please specify): Means of support □ Cash □ Accomodation provided □ All expenses covered during the stay □ Pre-paid transport □ Other (please specify):						
34. Personal data of the family member who is an EU, EEA or CH citizen Surname							
Date of birth Nationality Nu	First name(s) mber of travel document or ID card						
35. Family relationship with an EU, EEA or CH citizen : ☐ spouse ☐ child ☐ grandchild ☐ dependent ascendant							
36. Place and date 37. Signature (for minors, signature of parental authority / legal guardian)							
I am aware that the visa fee is not refunded if the visa is refused.							
Applicable in case a multiple-entry visa is applied for (cf. field no 24): I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States.							
I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints are mandatory for the examination of the visa application; and any personal data concerning me which appear on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on my visa application. Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the Visa Information System (VIS)¹ for a maximum period of five years, during which it will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Member States, immigration and asylum authorities in the Member States for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled, of identifying persons who do not or who no longer fulfil these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will be also available to designated authorities of the Member State responsible for processing the data is: Commission Nationale de l'Informatique et des Libertés – 8, rue Vivienne – 75083 PARIS cedex 02 I am aware that I have the right to obtain in any of the Member States notification of the data relating to me processed unlawfully be deleted. At my express request, the authority examining my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have then corrected or deleted, including the related remedies according to the national law of the State concerned. The national supervisory authority of that Member State (Comm							
(1) Insolat as the 110 is operational							

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