

## Application for Schengen visa

This application form is free

РНОТО

1. Surname (l'amily name) (s)  2. Surname at birth (former family name(s)) (s)  3. First name(s) (Given name(s)) (s)  3. First name(s) (Given name(s)) (s)  8. Sec    Date of Birth   S. Place of birth   S. Place of birth   Nationality at birth, if different   Application number :  8. Sec   Date of Birth   S. Place of birth   S. Place of birth   S. Place of birth   Nationality at birth, if different   Application lodged at a large of the large of the large   Divorceal   Wichow (er)   Streep powder   Secret									
2. Surname at birth (Former family name(s)) (x)  4. Date of birth (day-month-year)  5. Place of birth:	1. Surname (Family name) (x)	-							
S. First name(s) (Given name(s)) (s)	2 Surname at hirth (Former family		Date of application :						
A. Date of birth (day month year)   S. Place of birth:   Nationality   Nationality   S. Place of birth:	2. Juliane at birth (Former farmly		Visa application number :						
4. Date of birth (day-month-year)  6. Country of birth:  7. Current nationality: Nationality at birth, if different: Nationality at birth, if different:  8. Sex  9. Married Status Single Married Separated Divorced Widow(ex) Single Married Separated Divorced Widow(ex) Single Married Separated Divorced Divorced Service possible Condenses specify  10. In the case of minors: Sumame, first name, address (if different from applicant's) and nationality of parental authority/legal guardian  11. National identity number, where applicable  12. Type of travel document Ordinary passport Diplomatic passport Service passport Official passport Service passport Diplomatic passport Service passport Diplomatic pass	3. First name(s) (Given name(s)) (x		File handled by:						
8. Sex   O. Marital Starts   Separated   Divorced   Widow(er)   CaC   Ca		5. Place of birth:				7. Current nationality:			File handled by :
Sex	(day monai year)	6. Country	ry of birth:			Nationality at birth, if different: :		erent: :	
Male   Female     Other (please specify)   Commercial intermediary   Border   Section   Sectio	8. Sex				d Consisted Discount DW/dow/sa				□ CAC
authority/legal guardian   Other    11. National identity number, where applicable :   Other    12. Type of travel document   Ophoratic passport   Service passport   Official passport   Special passport   Means of subsistence   Invitation   Means of transport   Invitation   Means of transport   Invitation   Invitati	Mala Damala							ow(er)	□ Commercial intermediary
1. National identity number, where applicable :			Name:						
12. Type of travel document   Supporting documents :   Travel document (please specify) :   Service passport   Official passport   Special passport   Mass of subsistence   Invitation   Mass of subsistence   Invitation   Mass of transport   Mass			□ Other						
Ordinary passport   Diplomatic passport   Service passport   Official passport   Special passport   Means of subsistence   Invitation   Means of Subsistence   Invitation   Means of Univitation   Means of	, , , , , , , , , , , , , , , , , , , ,								
Other travel document (please specify):	**								
13. Travel document number   14. Date of issue   15. Valid until   16. Issued by   Means of transport   TMI   Other    17. Applicant's home address and e-mail address   Telephone number(s)   Visa decision :   Refused   Issued :   I			□ Means of subsistence						
Other.   Other.   Other.	13. Travel document number	14. D	ate of issue	15. Va	lid until		16. Issued by	l by	☐ Means of transport
18. Residence in a country other than the country of current nationality									
Refused   Issued :	17. Applicant's home address and e-mail address  Telephone number(s)								
18. Residence in a country other than the country of current nationality									
18. Residence in a country other than the country of current nationality  No Yes: Residence permit or equivalent N°									
* 19. Current occupation  * 20. Employer and employer's address and telephone number. For students, name and address of educational establishment.  21. Main purpose(s) of the journey:  Tourism Business Visiting family or friends Cultural Sports Official visit Study  Medical reasons Transit Airport transit Other (please specify):  22. Member State(s) of destination  23. Member State of first entry  24. Number of entries requested Single entry Two entries Multiple entries  15. Duration of the intended stay or transit Indicate number of days:  26. Schengen visas issued during the past three years  No	18. Residence in a country other the		□ A						
* 20. Employer and employer's address and telephone number. For students, name and address of educational establishment.  21. Main purpose(s) of the journey:    Tourism   Business   Visiting family or friends   Cultural   Sports   Official visit   Study     Medical reasons   Transit   Airport transit   Other (please specify):  22. Member State(s) of destination   23. Member State of first entry    24. Number of entries requested   25. Duration of the intended stay or transit   Indicate number of days:  26. Schengen visas issued during the past three years   No	☐ No ☐ Yes: Residence								
* 20. Employer and employer's address and telephone number. For students, name and address of educational establishment.  Until	* 19. Current occupation		□ Valid :						
21. Main purpose(s) of the journey:  Tourism Business Visiting family or friends Cultural Sports Official visit Study  Medical reasons Transit Airport transit Other (please specify):  22. Member State(s) of destination  23. Member State of first entry  24. Number of entries requested Single entry Two entries Multiple entries  25. Duration of the intended stay or transit Indicate number of days:  26. Schengen visas issued during the past three years			From						
21. Main purpose(s) of the journey:  Tourism Business Visiting family or friends Cultural Sports Official visit Study  Medical reasons Transit Airport transit Other (please specify):  22. Member State(s) of destination  23. Member State of first entry  24. Number of entries requested Single entry Two entries Multiple entries  25. Duration of the intended stay or transit Indicate number of days:  26. Schengen visas issued during the past three years  No	establishment.		Until						
□ Tourism       □ Business       □ Visiting family or friends       □ Cultural       □ Sports       □ Official visit       □ Study         □ Medical reasons       □ Transit       □ Airport transit       □ Other (please specify):         22. Member State(s) of destination       23. Member State of first entry         24. Number of entries requested       25. Duration of the intended stay or transit         □ Single entry       □ Two entries       □ Multiple entries         26. Schengen visas issued during the past three years       □ No									
☐ Medical reasons ☐ Transit ☐ Airport transit ☐ Other (please specify):   22. Member State(s) of destination 23. Member State of first entry   24. Number of entries requested 25. Duration of the intended stay or transit   ☐ Single entry ☐ Two entries ☐ Multiple entries   26. Schengen visas issued during the past three years ☐ No		Number of days:							
24. Number of entries requested  Single entry Two entries Multiple entries  25. Duration of the intended stay or transit Indicate number of days:  26. Schengen visas issued during the past three years  No									
☐ Single entry ☐ Two entries ☐ Multiple entries ☐ Indicate number of days:  26. Schengen visas issued during the past three years ☐ No	22. Member State(s) of destination								
☐ Single entry ☐ Two entries ☐ Multiple entries ☐ Indicate number of days:  26. Schengen visas issued during the past three years ☐ No	24. Number of entries requested 25. Duration of the intended stay or transit						transit		
□No	☐ Single entry ☐ Two entries ☐ Multiple entries ☐ In					Indicate number of days:			
1 es. Date(s) of validity	☐ Yes. Date(s) of validity								
27. Fingerprints collected previously for the purpose of applying for a Schengen visa  No Tyes. Date, if known:	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									

<sup>\*</sup> 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	ss of inviting person(s)/hotel	(s)/temporary accor	mmodation(s)	Telephone and telefax				
* 32. Name and address of	of inviting company/organisa	tion		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 ar	nd 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 fa	mily member who is an EU,	EEA or CH citizen						
Date of birth	Nationality	Numb	First name(s)  mber of travel document or ID card					
25 F 3 1 1 1 1 1	·							
35. Family relationship with an EU, EEA or CH citizen :  ☐ spouse ☐ child ☐ grandchild ☐ dependent ascendant								
36. Place and date	37. S.	ignature (for minors	s, signature of parental authority / legal guardian)					
I am aware that the visa fee	is not refunded if the visa is re	fused.						
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 Libertès – 3 Place de Fontenoy - TSA 80715 - 77334 PARIS CEDEX 07    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 them corrected or deleted, including the related remedies according to the nanner in which I may exercise my right to check the personal data concerning m								
	pertional		- o mar (or minors, significant or purchase and or significant and or					
(1) Insofar as the VIS is op	perational							

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