

Application for Schengen Visa

This application form is free.



| Photo | |
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| 1 Surname (Family name) (x) | | | For official use only | | |
|--|-----------------------------------|------------------------|--|----------------------------------|---|
| 2 Surname at birth (Former family name(s)) (x) | | | Date of application: | | |
| 3 First name(s) (Given name(s)) (x) | | | | Visa application number: | |
| 4 Date of birth (Day-Month-Year) | 5 Place of birth | | 7 Current nationali | iy: | File handled by: |
| | 6 Country of birth | | Nationality at bir | th, if different: | |
| 8 Sex 9 Marital status Male Female Single Married Separated Divorced Widow(er) | | | | | Application lodged at: Embassy/consulate CAC Service provider Commercial intermediary |
| Other (please specify): 10 In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authory/legal guardian | | | | Border | |
| To in the case of filling s. Cumulic, | instruurie, address (ir directori | тот арроант зу ана п | ationality of paromai | authory/logal guardian | Name: Other: Supporting documents: Travel document |
| 11 National identity number, where applicable | | | Means of subsistence Invitation Means of transport | | |
| 12 Type of travel document Ordinary passport Diplomatic passport Service passport Official passport Special passport Other travel document (please specify): | | | | | TMI Other: |
| " | Date of issue | 15 Valid until | 16 Issued | by | Refused Issued: |
| 17 Applicant's home address, e-ma | il address | | Telephone | number(s) | C C |
| | | | | | ☐ Valid |
| 18 Residence in a country other than the country of current nationality | | | From | | |
| No Yes. Residence permit or equivalent No Valid until | | | | Until | |
| *19 Current occupation | | | | Number of entries: 1 2 Multiple | |
| *20 Employer and employer's address | ss and telephone number. For | students, name and add | dress of educational | establishment. | Number of days: |
| 21 Main purpose(s) of the journey: | | | | | |
| Tourism Business Cultural Sports Medical reasons Visiting family or friends Official visit | | | | | |
| Study Transit | Airport transit Other (PI | lease 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 | | |
| Single entry Two entries | indicate number of days | | |
| Multiple entries | | | |
| The fields marked with * shall not be filled in by family members to free movement. Family members of EU, EEA or CH citizens s | of EU, EEA or CH citizens (spouse, child or dependent ascend hall present documents to prove this relationship and fill in field | dant) while exercising their right ds N° 34 and 35. | |
| (x) Fields 1–3 shall be filled in accordance with the data in the tra | avel document. | | |
| | | | |
| | | | |
| 26 Schengen visas issued during the past three years | | | |
| No | | | |
| | to | | |
| 27 Fingerprints collected previously for the purpose of applying for a No Yes | a Schengen visa | | |
| INO LITES | | | |
| | Date, if known | | |
| 28 Entry permit for the final country of destination, where applicable | | | |
| | | | |
| Issued by Valid from | until | | |
| 29 Intended date of arrival in the Schengen area | 30 Intended date of departure from the Schengen area | | |
| | | | |
| tot O | | | |
| *31 Surname and first name of the inviting person(s) in the Member Saccommodation(s) in the Member State(s) | state(s). If not applicable, name of notel(s) or temporary | | |
| | | | |
| | | | |
| | | | |
| Address and e-mail address of inviting person(s)/hotel(s)/temporary | Telephone and telefax | | |
| accommodation(s) | | | |
| | | | |
| too Name and address of inviting a common familiar | Telephone and telefax of company | | |
| *32 Name and address of inviting company/organisation | relephone and telerax of company | | |
| | | | |
| Surname, first name, address, telephone, telefax and e-mail address | s of contact person in company/organisation | | |
| | | | |
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| too o at a face allies and links a decide at the conditional at the co | 4 | | |
| *33 Cost of travelling and living during the applicant's stay is covered | | | |
| | | | |
| _ | _ | | |
| by the applicant himself/herself | by a sponsor (host, company, organisation), please specify | | |
| | | | |
| Means of support: | referred to in field 31 or 32 | | |
| means of support. | | | |
| Cash | other (please specify) | | |
| Traveller's cheques | | | |
| Credit card | Means of support Cash | | |
| | | | |
| Prepaid accommodation | Accommodation provided | | |
| Prepaid transport | All expences covered during the stay | | |
| Other (please specify) | Prepaid transport | | |
| Curior (piecase specify) | | | |
| | Other (please specify) | | |
| | | | |

| 34 Personal data of the family member who | is an EU, EEA or CH ci | tizen | | |
|---|---|---|--|--|
| Surname First name(s) | | | | |
| Surraine | | T iist Hame(s) | | |
| Date of birth | Nationality | | Number of travel document or ID card | |
| 35 Family relationship with an EU, EEA or C | CH citizen | | | |
| spouse child | | grandchil | d dependent ascendant | |
| 36 Place and date | | 37 Signature (for m guardian) | inors, signature of parental authority/legal | |
| | | | | |
| | | | | |
| I am aware that the visa fee is not reful | nded if the visa is refu | used. | | |
| Applicable in case a multiple-entry visa | a is applied for (cf. fie | eld No. 24): | | |
| I am aware of the need to have an ade | quate travel medical | insurance for my fi | rst stay and subsequent visits to the te | erritory of Member States. |
| I am aware of and consent to the fol applicable, the taking of fingerprints, a on the visa application form, as well a processed by those authorities, for the | are mandatory for the as my fingerprints an | e examination of the nd my photograph | e visa application; and any personal da will be supplied to the relevant author | ata concerning me which appear |
| Such data as well as data concerning entered into, and stored in the Visa In authorities and the authorities compete authorities in the Member States for the Member States are fulfilled, of ider determining responsibility for such exar and to Europol for the purpose of the pof the Member State responsible for predex 02 - France | oformation System (Vent for carrying out of the purposes of verify atifying persons who mination. Under certa prevention, detection | (IS) (1) for a maxim hecks on visas at e ying whether the co do not or who no lo ain conditions the d and investigation of | num period of five years, during which xternal borders and within the Member onditions for the legal entry into, stay onger fulfil these conditions, of examin ata will be also available to designated of terrorist offences and of other seriou | it will be accessible to the visa States, immigration and asylum and residence on the territory of ing an asylum application and of authorities of the Member States is criminal offences. The authority |
| I am aware that I have the right to obt State which transmitted the data, and unlawfully be deleted. At my express to check the personal data concerning State concerned. The national supervi 75083 Paris cedex 02 - France) will he | to request that data request, the authority g me and have them sory authority of that | relating to me white rexamining my appropriected or delet t Member State (C | ch are inaccurate be corrected and that olication will inform me of the manner ed, including the related remedies accommission Nationale de l'Informatique | at data relating to me processed in which I may exercise my right cording to the national law of the |
| I declare that to the best of my knowle my application being rejected or to the State which deals with the application. | annulment of a visa | | correct and complete. I am aware that y may also render me liable to prosecut | |
| I undertake to leave the territory of the one of the prerequisites for entry into t that I will be entitled to compensation (Code) and I am therfore refused entry | he European territory If I fail to comply with | of the Member Start the relevant provis | ates. The mere fact that a visa has bee | n granded to me does not mean lo. 562/2006 (Schengen Borders |
| Place and date | | Signature (for minor | s, signature of parental authority/legal guard | lian) |
| | | | | |