



Photo

Stamp Embassy or  
Consulate

## Application for Visa

This application form is free

1. Surname(s) (family name(s))			FOR EMBASSY/ CONSULATE USE ONLY Date application :  File handled by : <input type="checkbox"/> Valid passport <input type="checkbox"/> Financial means Valid until (Passport)  <input type="checkbox"/> Invitation <input type="checkbox"/> Means of transport <input type="checkbox"/> Health insurance <input type="checkbox"/> Other :																			
2. Father's name																						
3. First names (given names)																						
4. Date of birth (year-month-day)		5. Place and country of birth																				
6. Current nationality/ies		7. Original nationality (nationality at birth)																				
8. Number of passport		9. Issued by																				
10. Date of issue																						
11. Current occupation		12. Employer's address and telephone number																				
13. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		14. Marital status : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other																				
15. Spouse's name and surname	16. Spouse's Date / place of birth	17. Spouse's Nationality																				
18. Children																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 60%;">Surname</th> <th style="width: 30%;">Name</th> <th style="width: 10%;">Date of birth</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td><td></td><td></td></tr> <tr><td>2.</td><td></td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td><td></td></tr> <tr><td>4.</td><td></td><td></td><td></td></tr> </tbody> </table>				Surname	Name	Date of birth	1.				2.				3.				4.			
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1.																						
2.																						
3.																						
4.																						
19. Type of visa <input type="checkbox"/> Individual <input type="checkbox"/> Collective		20. Type of Visa : <input type="checkbox"/> Airport transit <input type="checkbox"/> Transit <input type="checkbox"/> Short stay <input type="checkbox"/> Long stay																				
		21. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries																				
22. Other visas (issued during the past three years) and their period of validity		23. Purpose of travel <input type="checkbox"/> LTV (Long Term Visa) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> D + C <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple																				
24. Date of arrival		25. Date of departure																				
26. Persons for recommendation during the stay / Address and telephone																						
27. Means of support during your stay Cash Travellers' cheques Credit cards Accommodation Other: Travel and/or health insurance. Valid until:																						
28. Present address and telephone number																						
29. Place and date		30. Signature																				