Application for Schengen Visa This application form is free



1. Surname (Family name) (x)				FOR OFFICIAL USE ONLY
2. Surname at birth (Former family	name(s)) (x)			Date of application:
				Visa application number:
3. First name(s) (Given name(s)) (x)			Application lodged at
4. Date of birth (day-month-year)	5. Place of birth		7.Current nationality	□ CAC □ Service provider
	6. Country of bir	th	Nationality at birth, if di	□ Commercial ifferent: intermediary □ Border
3. Sex 9. Marital status Image: Male II Female Image: Single II Married II Separated III Divorced III Widow(er) Image: Other (please specify)			Name: ∕idow(er) □ Other	
10. In the case of minors: Surname,	first name, address	(if different from ap	oplicant's) and nationality	File handled by:
authority/legal guardian 11. National identity number, where 12. Type of travel document □ Ordinary passport □ Diplomatic p □ Other travel document (please spo	assport □ Service p	passport □ Official pa	ssport □ Special passport	Supporting documents: Travel document Means of subsistence Invitation Means of transport TMI Other:
	4. Date of issue	15. Valid until	16. Issued by	Visa decision: □ Refused
17. Applicant's home address and e	mail address		Telephone number(s)	□ Issued: □ A □ C □ LTV
 18. Residence in a country other tha □ No □ Yes. Residence permit or equival 	2	2	Valid until	□ Valid: From
* 19. Current occupation				Until
				Number of entries: $\Box \ 1 \ \Box \ 2 \ \Box \ Multiple$
				Number of days:

РНОТО

* 20. Employer and employer's address and telephone numb establishment.	er. For students, name and address of educational	
21. Main purpose(s) of the journey:		
□ Tourism□ Business□ Visiting family or friends	s□ Cultural□ Sports□ Official visit	
Medical reasons		
□ Study□ Transit □ Airport transit□ Other (please	specify)	1
22. Member State(s) of destination	23. Member State of first entry	
1	25. Duration of the intended stay or transit	
□ Single entry□ Two entries□ Multiple entries		1
	Indicate number of days	

* The fields marked with * shall not 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.

(x) Fields 1-3 shall be filled in in accordance with the data in the travel document.	
26. Schengen visas issued during the past three years	
□ Yes. Date(s) of validity from to	
27. Fingerprints collected previously for the purpose of applying for a Schengen visa	
□ No	
28. Entry permit for the final country of destination, where applicable	
Issued byuntil	
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 Telephone and telefax	
accommodation(s)	

*32. Name and address of invitin	g company/organisat	ion	Telephone and telefax of company/organisation	
			company, or gamsation	
Surname, first name, address, tele	ephone, telefax, and e	-mail address of contac	ct person in company/organisation	
*33. Cost of travelling and living	during the applicant'	s stay is covered		-
□ by the applicant himself/hersel	f		or (host, company, organisation),	-
			use specify red to in field 31 or 32	
		other	(please specify)	
Moone of summert				
Means of support □ Cash		Means of su	pport	
Traveller's cheques		□ Cash		
Credit card Rea paid accommodation			dation provided ses covered during the stay	
 Pre-paid accommodation Pre-paid transport 		□ An expens □ Pre-paid tr	ansport	
 Pre-paid transport Other (please specify) 		□ Other (please specify)		
		·		
34. Personal data of the family m	ember who is an EU,	EEA or CH citizen		_
,	· · · ,			
Surname		First nan	ne(s)	_
Date of birth	Nationality	,	Number of travel document or	-
			ID card	
35. Family relationship with an E	EU, EEA or CH citize	n		
□ spouse□ child			ascendant	
36. Place and date		37. Signature (for mine	ors, signature of parental	
		authority/lega	l 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 States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. The authority of the Member State responsible for processing the data is the FPS Home Affairs – Immigration Office – 59b Chaussée d'Anvers, 1000 Brussels, Belgium.

I am aware that I have the right to obtain in any of the Member States notification of the data relating to me recorded in the VIS and of the Member State which transmitted the data, and to request that data relating to me which are inaccurate be corrected and that 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 national law of the State concerned. The national supervisory authority of this Member State (*Commission for the Protection of Privacy - 139, rue Haute, 1000 Brussels, Belgium*) will hear claims concerning the protection of personal data.

I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of the Member State which deals with the application.

I undertake to leave the territory of the Member States before the expiry of the visa, if granted. I have been informed that possession of a visa is only one of the prerequisites for entry into the European territory of the Member States. The mere fact that a visa has been granted to me does not mean that I will be entitled to compensation if I fail to comply with the relevant provisions of Article 5(1) of Regulation (EC) No 562/2006 (Schengen Borders Code) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Member States.

Place and date	Signature (for minors, signature of parental authority/legal guardian):

¹ Insofar as the VIS is operational.