

STA	MP		

## Schengen Visa Application

This application form is free of charge

РНОТО	

1.	Surname (Family name) (x)					F
						For official use only
2.	Surname at birth (Former fam	ily name(s)) (x)				
3.	First name(s) (Given name(s))	(v)				Date of application:
	That hame(b) (Given hame(b))	(A)				
4.	Date of birth	5. Place of birth 7. Current nationality		Visa application number:		
	(day-month-year))					
		6. Country of b	oirth	Nation	ality at birth, if different:	
					,,	Application lodged at:
8.	Sex	9. Marital statu	IS	I.		Embassy/consulate
	☐ Male ☐ Female	Single			Separated	CAC Service provider
		_	Divorced Widow(er)			Commercial intermediary
		Other	(please specify	7)		Border
10	T1 C. : . C	C	(:C 1:CC C	11	:	Name:
10.	In the case of minors: Surname, parental authority/legal guardia		(ir different fi	rom appli	cants) and nationality of	Other
						File handled by:
11.	1. National identity number, where applicable					
	,	Supporting documents:				
12.	Type of travel document	Travel document				
	☐ Ordinary passport ☐ Diplomatic passport ☐ Service passport ☐ Official passport					☐ Means of subsistence
	Special passport Oth	☐ Invitation				
12	N 1 C 1 14	1/ 1 11	Means of transport			
13.	Number of travel document 14.	14. Date of issue 15. Valid until 16. Issued by			TMI	
	document					Other:
17.	Applicant's home address and e	hone number(s)				
						Visa decision:  ☐ Refused
						Issued:
18.	Residence in a country other th		A Issued.			
	□ No					l ii c
	Yes. Residence permit or equivalent					LTV
* 19.	19. Current occupation					
* 20.	* 20. Employer and employer's address and telephone number. For students, name and address of					From:
	educational establishment.					
		Until:				
21.						Number of entries:
	☐ Tourism ☐ Business ☐ Visiting family or friends ☐ Cultural					1 2 Multiple
	Sports Official visit Medical reasons Study					
	☐ Transit ☐ Airport transit ☐ Other (please specify) Number of days:					
22.	22. Member State(s) of destination 23. Member State of first entry					1

<sup>\*</sup> 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.

24.	Number of entries requested Single entry Two entries			25.		the intended stay or transit mber of days	
2/	Multiple entries	Multiple entries					
26.	Schengen visas issued during the past to No	hree ye	ears				
	Yes. Date(s) of validity from			. to			
27	Fingerprints collected previously for th	0 51155	oso of applying f	or a Schon	ron vica		
27.	No	e purp	ose of applying i	or a scheng	gen visa		
28.	Yes. Date, if known: Entry permit for the final country of de	stinatio	on, where applica	able			
					unti	il	
29.							
* 31.	* 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	e(s)					
	ess and e-mail address of inviting person nmodation(s)	(s)/hot	tel(s)/temporary		Telephone and telefax		
accon	imodation(s)						
* 32	Name and address of inviting company	/organ	ieation		Telephone	and telefax of company/organisation	
* 32. Name and address of inviting company/organisation  Telephone and telefax of company/organisation					and telefax of company/organisation		
Surna	me, first name, address, telephone, telef	ax, and	l e-mail address o	of contact p	erson in com	npany/organisation	
* 33.	Cost of travelling and living during the	applica	ant's stay is cover	ed			
□ I	☐ By the applicant himself/herself ☐ By a sponsor (host, company, organisation), please specify						
				☐ Referred to in field 31 or 32 ☐ Other (please specify)			
Mean	s of support			Means of support			
_	ash			□ Cash			
☐ Traveller's cheques ☐ Credit card			☐ Accommodation provided ☐ All expenses covered during the stay				
Pt	re-paid accommodation			Pre-paid transport			
_	☐ Pre-paid transport ☐ Other (please specify)			Othe	r (please spec	cify)	
34.							
Surname:			First name(s):				
D.	C1 :1	NI .:	. 15.			N. I. G. II ID I	
Date o	f birth	Natio	nality			Number of travel document or ID card	
35. Family relationship with an EU, EEA or CH citizen							
	Spouse	Child		Grandchil	d [	Dependent ascendant	
36.	Place and date		37. Signatur	e (for mino	rs, signature	of parental authority/legal guardian)	
			-				

<sup>\*</sup> 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.

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: Ministry of Foreign Affairs, Consular Affairs and Visa Policy Department (DCV), Postbus 20061, 2500 EB DEN HAAG.

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 that Member State [Autoriteit Persoonsgegevens, Postbus 93374, 2509 AJ DEN HAAG] 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):		