



Application for Schengen visa

This application form is free

ΡΗΟΤΟ

1. Surname (Family name) (x)							For official use only		
							Date of application :		
2. Surname at birth (Former family name(s)) (x)							Visa application number :		
3. First name(s) (Given name(s)) (s	File handled by :								
4. Date of birth (day-month-year)	5. Place of	of birth :		7.	. Curre	nt nationality :	The fundation by t		
((,)	6. Country of birth : Nationality at birth, if differ				hality at birth, if different: :	Application lodged at : □ Embassy/consulate			
8. Sex	☐ Single		Married Separated Divorced Widow(er) ase specify)				 CAC Service provider Commercial intermediary Border 		
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian							Name :		
							□ Other		
11. National identity number, where applicable :12. Type of travel document							Supporting documents :		
 Drdinary passport Diplomatic passport Service passport Official passport Special passport Other travel document (please specify) : 							□ Travel document □ Means of subsistence		
13. Travel document number	14.	Date of issue	15. Vali	d until		16. Issued by	□ Invitation □ Means of transport □ TMI □ Other:		
17. Applicant's home address and	-								
							Visa decision : □ Refused □ Issued :		
 18. Residence in a country other than the country of current nationality No Yes : Residence permit or equivalent N°Valid untilValid until 							$\Box A$ $\Box C$ $\Box LTV$		
* 19. Current occupation							□ Valid :		
 * 20. Employer and employer's address and telephone number. For students, name and address of educational 							From		
establishment.							Until		
							Number of entries : $\Box 1 \Box 2 \Box$ Multiple		
21. Main purpose(s) of the journe	-	mily or friends] Cultu r al 🔽	Sports	l Offici	al visit 🔲 Study	Number of days :		
	_	·							
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			Indicate number of days :						
 26. Schengen visas issued during t No Yes. Date(s) of validity 			,	/	, .	/	-		
27. Fingerprints collected previou	sly for the p	ourpose of applyin	ng for a Schen	gen visa			-		
28. Entry permit for the final cour Issued by	ntry of dest	ination, where app , valid from	olicable		un	til	-		

* 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.

(x) Fields 1-3 shall be filled in in accordance with the data in the travel document.

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 according to the second s	nmodation(s)	Telephone and telefax						
* 32. Name and address of inviting company/organisation		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 and 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 family member who is an EU, EEA or CH citizen Surname	1							
	First name(s) per of travel document or ID card							
35. Family relationship with an EU, EEA or CH citizen : spouse child grandchild dependent ascendant 36. Place and date 37. Signature (for minors, signature of parental authority / legal 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 State responsible for processing the data is: <i>Commission Nationale de l'Informatique et des Libertés – 8, rue Vivienne – 75083 PARIS cedex 02</i> I am aware that 1 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 ulawfully 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								
Place and date	Signature (for minors, signature of parental author	rity/legal guardian):						