

Application for Schengen Visa

* *	This application form is free				РНОТО
^*** [^]					
1. Surname (Family name):					FOR OFFICIAL USE ONLY
2. Surname at birth (Former fam	ilv nama	(c)) ·			Date of application:
2. Sumanie at offui (Pornier fain	пу паше	(8)) .			Date of application.
3. First name(s) (Given name(s))	Visa application number:				
4. Date of birth (day-month-year):	5. Place of birth:		7.Current nationality:	Application lodged at
		6. Country of birth:		Nationality at birth, if different:	□ Embassy/consulate □ Service provider □ Commercial intermediary
				Other nationalities:	□ Border (Name)
8. Sex:		9.	Marital status:		·
□ Male □ Female	☐ Single ☐ Married ☐ Registered Partnership ☐ Separated ☐ Divorced ☐ Widow(er) ☐ Other (please specify)			□ Other	
telephone number, e-mail addres	s and nat	ionality):			File handled by: Supporting documents:
11. National identity number, wh	☐ Travel document ☐ Means of subsistence ☐ Invitation				
12. Type of travel document:	☐ Means of transport☐ TMI☐ Other:				
☐ Ordinary passport ☐ Diplom☐ Other travel document (plea			ssport 🗆 Official pass	port Special passport	
13. Number of travel document:	14.	Date of issue:	15. Valid until:	16. Issued by (country):	Visa decision:
17. Personal data of the family n	□ Refused □ Issued: □ A				
Surname (Family name): First name(s) (Given name(s)):				□ C □LTV	
					□ Valid: From Until
Date of birth (day-month-year):		Nationality:		Number of travel documents or ID card:	Number of entries: □ 1 □ 2 □ Multiple
18. Family relationship with an I	EU, EEA	or CH citizen:		<u> </u>	Number of days:
□ spouse □ child □ grandchild	□ depen	dent ascendant	registered partnership	o other	

19. Applicant's home address and e-mail address:	Telephone number(s):
20. Residence in a country other than the country of current na	tionality:
□ No	
☐ Yes. Residence permit or equivalent	Number
* 21. Current occupation:	
1	
* 22. Employer and employer's address and telephone number.	For students, name and address of educational establishment:
23. Main purpose(s) of the journey:	
☐ Tourism ☐ Business ☐ Visiting family or friends ☐ Cultural ☐ Medical reasons ☐ Study ☐ Airport transit ☐ Other (please sp	□ Sports □ Official visit
Miculcal reasons Study Amport transit Other (prease sp	(CCITY)
24. Additional information on purpose of stay:	
	00 M 1 G 4 CC" 4
25. Member State(s) of main destination (and other Member States of destination, if applicable):	26. Member State of first entry:
States of destination, if applicable).	
27. Number of entries requested:	
□ Single entry □ Two entries □ Multiple entries	
Intended date of arrival of the first intended stay in the Scher	ngen area:
,	6
Intended date of departure from the Schengen area after the	first intended stay:
28. Fingerprints collected previously for the purpose of applying	og for a Schengen visa: □ No □ Ves
20. Thige prints concered previously for the purpose of applying	is for a beneficer visa. If two I fee.
Date, if knownVisa sticker num	ber, if known
29. Entry permit for the final country of destination, where app	Nachla:
29. Entry permit for the final country of destination, where app	nicatie.
Issued byValid fro	muntil
* 30. Surname and first name of the inviting person(s) in the M. Member State(s)	Iember State(s). If not applicable, name of hotel(s) or temporary accommodation(s) in the
ivieniber State(s)	
Address and e-mail address of inviting	Telephone number:
person(s)/hotel(s)/temporary accommodation(s):	
*31. Name and address of inviting company/organisation:	
31. Ivaine and address of inviting company/organisation.	
Cymnomo fuet nome adduces and a mail adduces of contest	Tolombono nymbon of commony/cuccuisation.
Surname, first name, address and e-mail address of contact person in company/organisation:	Telephone number of company/organisation:
r	
*32. 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 30 or 31 □ other (please specify) Means of support: □ Cash □ Accommodation provided □ All expenses covered during the stay □ Pre-paid transport
	□ Other (please specify)
I am aware that the visa fee is not refunded if the	e visa is refused.
Applicable in case a multiple-entry visa is applied	d for (cf. field no 27):
I am aware of the need to have an adequate trav of Member States.	vel medical insurance for my first stay and any subsequent visits to the territory
photograph and, if applicable, the taking of fingersonal data concerning me which appear on the	e collection of the data required by this application form and the taking of my gerprints, are mandatory for the examination of the visa application; and any he visa application form, as well as my fingerprints and my photograph will be er States and processed by those authorities, for the purposes of a decision on my
issued will be entered into, and stored in the Visa will be accessible to the visa authorities and the within the Member States, immigration and asylconditions for the legal entry into, stay and resid who do not or who no longer fulfil these conditions the examination. Under certain conditions the Europol for the purpose of the prevention, detect	a taken on my application or a decision whether to annul, revoke or extend a visa a Information System (VIS) for a maximum period of five years, during which it authorities competent for carrying out checks on visas at external borders and lum authorities in the Member States for the purposes of verifying whether the dence on the territory of the Member States are fulfilled, of identifying persons ions, of examining an asylum application and of determining responsibility for data will be also available to designated authorities of the Member States and to tion and investigation of terrorist offences and of other serious criminal offences g the data is the consular post at which the visa was applied for.
and of the Member State which transmitted the and that data relating to me processed unlawfull inform me of the manner in which I may exercise deleted, including the related remedies according of that Member State [in the Spanish case, the Agents of the Spanish case]	of the Member States notification of the data relating to me recorded in the VIS data, and to request that data relating to me which are inaccurate be corrected y be deleted. At my express request, the authority examining my application will e my right to check the personal data concerning me and have them corrected or g to the national law of the State concerned. The national supervisory authority gencia Española de Protección de Datos; calle Jorge Juan, número 6 (C.P.28001) oce-tus-derechos/derechos-schengen, will hear claims concerning the protection
	particulars supplied by me are correct and complete. I am aware that any false cted or to the annulment of a visa already granted and may also render me liable to which deals with the application.
possession of a visa is only one of the prerequisithat a visa has been granted to me does not me provisions of Article 6(1) of Regulation (EC) N	per States before the expiry of the visa, if granted. I have been informed that ites for entry into the European territory of the Member States. The mere fact can that I will be entitled to compensation if I fail to comply with the relevant No 399/2016 (Schengen Borders Code) and I am therefore refused entry. The entry into the European territory of the Member States.
Place and date	Signature (for minors, signature of parental authority/legal guardian):

^{*}Family members of EU, EEA or CH citizens shall not fill in fields number 21, 22, 30, 31 and 32 (marked with *).

^{*} Fields 1-3 shall be filled in in accordance with the data in the travel document.