

SCHENGEN VISA APPLICATION FORM

PERSONAL INFORMATION

1. FAMILY NAME: _____
2. MIDDLE NAME: _____
3. FIRST NAME: _____
4. BIRTH DATE: _____
5. PLACE OF BIRTH: _____
6. COUNTRY OF BIRTH: _____
7. NATIONALITY AT BIRTH, IF DIFFERENT: _____
8. SEX: _____
9. MARITAL STATUS: _____

PASSPORT INFORMATION

10. PASSPORT NUMBER: _____
11. COUNTRY OF PASSPORT: _____
12. PLACE OF ISSUE: _____
13. DATE OF ISSUE: _____
14. DATE OF EXPIRY: _____

CONTACT INFORMATION

15. HOME ADDRESS: _____
16. CELL PHONE NUMBER: _____
17. HOME PHONE NUMBER: _____
18. EMAIL ADDRESS: _____

EMPLOYMENT

19. CURRENT OCCUPATION: _____
20. EMPLOYER'S NAME: _____
21. EMPLOYER'S ADDRESS: _____
22. TELEPHONE NUMBER: _____

FOR STUDENT

23. NAME OF SCHOOL: _____
24. NAME OF ADDRESS: _____

DETAILS OF VISIT

25. MEMBER STATE(S) OF DESTINATION: _____
26. MEMBER STATE OF FIRST ENTRY: _____
27. NUMBER OF ENTRIES REQUESTED: Single Entry Double Entry Multiple Entry
28. INDICATE NUMBER OF DAYS: _____
29. SCHENGEN VISAS ISSUED DURING THE PAST THREE YEARS: NO ____ YES ____ SPECIFY _____
30. INTENDED DATE OF ARRIVAL: _____
31. INTENDED DATE OF DEPARTURE: _____
32. COST OF TRAVELLING STAY IS COVERED: _____

INVITING PERSON

If Applicable

33. FAMILY NAME: _____
34. FIRST NAME: _____
35. ADDRESS: _____
36. EMAIL ADDRESS: _____

If Not Applicable

36. NAME OF HOTEL(S)/TEMPORARY ACCOMMODATION: _____

37. ADDRESS: _____

PERSONAL DATA OF THE FAMILY WHO IS AN EU, EEA OR CH CITIZEN

38. FAMILY NAME: _____

40. FIRST NAME: _____

41. DATE OF BIRTH: _____

42. NATIONALITY: _____

43. NUMBER OF TRAVEL DOCUMENT OR ID CARD: _____

44. FAMILY RELATIONSHIP WITH AN EU, EEA OR CH CITIZEN:

SPOUSE _____ CHILD GRANDCHILD _____ DEPENDENT _____ ASCENDANT _____

45. PLACE AND DATE: _____

VISA VERIFICATION PROCESS:

1. DO YOU HAVE PENDING TRAVEL ABROAD? YES _____ NO _____

2. DO YOU HAVE URGENT DOCUMENTS TO COMPLY NEEDING THIS VISA? YES _____ NO _____

3. ARE YOU FLEXIBLE TO TRANSIT YOUR PASSPORT/DOCUMENTS THRU COURIER? YES _____ NO _____

4. ARE YOU WILLING TO PAY ADDITIONAL FEES FOR AN EXPEDITE PROCESSING? YES _____ NO _____

5. DO YOU HAVE ANY TRANSACTION OF YOUR PASSPORT DURING YOUR APPLICATION? YES _____ NO _____

SIGNATURE OVER PRINTED NAME

NOTE: PLEASE DON'T LEAVE ANY SPACE BLANK. WRITE N/A IF NOT APPLICABLE