



Stamp Embassy or
Consulate

Application for Visa

This application form is free

1. Surname(s) (family name(s))			<p style="text-align: center;">FOR EMBASSY/ CONSULATE USE ONLY</p> <p>Date application :</p> <p>File handled by :</p> <p><input type="checkbox"/> Valid passport <input type="checkbox"/> Financial means</p> <p>Valid until</p> <p><input type="checkbox"/> Invitation <input type="checkbox"/> Means of transport <input type="checkbox"/> Health insurance <input type="checkbox"/> Other :</p>
2. Father's name			
3. First names (given names)			
4. Date of birth (year-month-day)		5. Place and country of birth	
6. Current nationality/ies		7. Original nationality (nationality at birth)	
8. Number of passport		9. Issued by	
10. Date of issue			
11. Current occupation		12. Employer's address and telephone number	
13. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		14. Marital status : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other	
15. Spouse's name and surname	16. Spouse's Date / place of birth	17. Spouse`s Nationality	
18. Children			
Surname	Name	Date of birth	
1.			
2.			
3.			
4.			
19. Type of visa <input type="checkbox"/> Individual <input type="checkbox"/> Collective		20. Type of Visa : <input type="checkbox"/> Airport transit <input type="checkbox"/> Transit <input type="checkbox"/> Short stay <input type="checkbox"/> Long stay	
21. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries			
22. Other visas (issued during the past three years) and their period of validity		23. Purpose of travel	
24. Date of arrival		25. Date of departure	
26. Persons for recommendation during the stay / Address and telephone			
27. Means of support during your stay Cash Travellers' cheques Credit cards Accommodation Other: Travel and/or health insurance. Valid until:			
28. Present address and telephone number			
29. Place and date		30. Signature	

- LTV
- A
- B
- C
- D
- D + C
- 1 2 Multiple