

Application for Schengen Visa This application form is free

РНОТО

1.	Surname (Family name) (x)	FOR OFFICIAL USE ONLY					
2.	Surname at birth (Former family nan	Date of application:					
3.	First name(s) (Given name(s)) (x)	Visa application number:					
	Date of birth (day-month-year) Sex	5. Place of bin6. Country of	f birth 9. Marital status				Application lodged at Embassy/consulate CAC Service provider Commercial intermediary Border
10.	□ Male □ Female □ Single □ Married □ Separated □ Divorce □ Widow(er) □ Other (please specify) n the case of minors: Surname, first name, address (if different from applicant's) and nationality of parenta					se specify)	Name: ☐ Other
	authority/legal guardian	File handled by:					
11.	National identity number, where app	licable					Supporting documents:
12.	Type of travel document ☐ Ordinary passport ☐ Diplomatic ☐ Other travel document (please sp	☐ Travel document ☐ Means of subsistence ☐ Invitation ☐ Means of transport					
13.	Number of travel document	14. Date of iss	ue	15. Valid	l until	16. Issued by	☐ TMI ☐ Other:
17.	Applicant's home address and e-mai	Visa decision: Refused Issued: A					
18.	Residence in a country other than the	□ C □ LTV					
	No	□ Valid:					
* 1	9. Current occupation	From					
* 2	0. Employer and employer's address a establishment.	Until					
21.	Main purpose(s) of the journey:	Number of days:					
	☐ Tourism ☐ Business ☐ V						
	☐ Medical reasons ☐ Study ☐						

22. Member State(s) of destination		23. Membe	er State of first entry		
24 Nh		25. Dti.		-	
24. Number of entries requested			on of the intended stay or transit e number of days		
☐ Single entry ☐ Two entries	☐ Multiple entries				
The fields marked with * shall not be fill their right to free movement. Family mem 35.					
(x) Fields 1-3 shall be filled in in accordan	ce with the data in th	ne travel docun	nent.		
26. Schengen visas issued during the pas					
□ No					
☐ Yes ☐ Date(s) of validity from					
27. Fingerprints collected previously for	the purpose of apply	ing for a Scher	ngen visa		
□ No	☐ Yes				
	Date, i	f known			
28. Entry permit for the final country of o	destination, where ap	plicable			
Issued by	Valid from		until		
29. Intended date of arrival in the Scheng	gen area 30.	. Intended date	e of departure from the Schengen area		
* 31. Surname and first name of the invit	ing person(s) in the M	Member State(s	s). If not applicable, name of hotel(s)		
or temporary accommodation(s) in	the Member State(s)		•		
Address and e-mail address of inviting pe	erson(s)/hotel(s)/temp	porary	Telephone and telefax		
accommodation(s)					
* 32. Name and address of inviting com	pany/organisation	,	Telephone and telefax of		
52. Traine and address of inviting comp	punjiongumounon		company/organisation		
Surname, first name, address, telephone,	telefax, and e-mail ac	ddress of conta	ct person in company/organisation		
* 33. Cost of travelling and living during	the applicant's stay	is covered			
☐ by the applicant himself/herself	☐ by the applicant himself/herself ☐ by a sponsor (host,				
Means of support	☐ referred to in	n field 31 or 32			
☐ Cash	other (please	e specify)			
☐ Traveller's cheques	Means of suppor	rt .			
☐ Credit card					
☐ Prepaid accommodation					
☐ Prepaid transport	☐ Prepaid transport ☐ All expenses covered during the stay				
☐ Other (please specify)	Other (please specify)				

☐ Other (please specify).....

34. Personal data of the famil	y member who is an EU, EEA or	r CH citizen						
Surname		First name(s)						
	[
Date of birth	Nationality	Number of travel document or ID card						
35. Family relationship with a	an EU, EEA or CH citizen							
	grandchild 🔲 dependent a	ascendant						
36. Place and date		37. Signature (for minors, signature of parental authority/legal guardian)						
I am aware that the visa fee is	s not refunded if the visa is refus	ed						
Tam aware mar me 13a ree 13	7 100 101 1110 1100 1101 101 101 101 101							
Applicable in case a multiple	-entry visa is applied for (cf. fiel	d No 24):						
I am aware of the need to hav	e an adequate travel medical ins	urance for my first stay and any subsequent visits to	the territory of Member States.					
	ē	of the data required by this application form and examination of the visa application; and any person						
	n, as well as my fingerprints an es, for the purposes of a decision	d my photograph will be supplied to the relevant a on my visa application.	authorities of the Member States and					
		my application or a decision whether to annul, re	voke or extend a visa issued will be					
entered into, and stored in th	he Visa Information System (VI	S) (1) for a maximum period of five years, during v	which it will be accessible to the visa					
authorities in the Member St	tates for the purposes of verifyin	ecks on visas at external borders and within the Mer g whether the conditions for the legal entry into, stay	y and residence on the territory of the					
		not or who no longer fulfil these conditions, of exa- tain conditions the data will be also available to d						
authority of the Member Sta	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: Ministry of Foreign Affairs, Loretánské náměstí 5, CZ-118 00 Praha 1; Directorate of Alien Police, Olšanská 2, P.O. BOX 78, CZ-130 51 Praha 3 and Ministry of the Interior, Nad Štolou 3, CZ-170 34 Praha 7.							
	-	ber States notification of the data relating to me rec						
		elating to me which are inaccurate be corrected an examining my application will inform me of the man						
State concerned. The nation	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 will hear claims concerning the protection of personal data: Office for Personal Data Protection, Pplk. Sochora 727/27, CZ-170 00 Praha 7.							
I declare that to the best of i	my knowledge all particulars su	pplied 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.								
	-	e the expiry of the visa, if granted. I have been infor						
that I will be entitled to cor	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/leg	gal guardian):					

¹ In so far as the VIS is operational.