

家庭构成

Form

Department of Immigration and Border Protection

N = 未婚或未有过事实婚姻

你想申请下列何种签证	·? 访问 (600) 其它	和子女,领	号你在原籍国和外国的所有家庭成 页养的兄弟姐妹和子女。(如果人	已不在世,可在"家庭地址"一	或同母异父)的兄弟姐妹和子女,继父与其前妻(或 栏填上"已故"。如果去向不明,可在"家庭地址" 道、同意并理解资料的填入的情况下,才能在宣誓一	一栏填上"不知道"。
家庭构成	姓	名	出生	婚恋状况 (请使用下表的代码)	家庭地址	以前是否来过澳大利亚
			日 月 年	(頃使用下來的10円)		日 月 年
你本人			/ /			/ /
配偶			/ /			/ /
事实婚姻			/ /			/ /
父亲/母亲			/ /			/ /
父亲/母亲			/ /			/ /
兄弟/姐妹			/ /			/ /
兄弟/姐妹			/ /			/ /
兄弟/姐妹			/ /			/ /
儿子/女儿			/ /			/ /
儿子/女儿			/ /			/ /
儿子/女儿			/ /			/ /
"婚恋状况"代码 M = 已婚 E = 订婚 F = 事实婚姻 S = 分居 D = 离婚	● 在他人协助	的资料完整而正确 下填写的本表任何部份的资料都是真	实和	清人签名	见证人签名 日 月 年	-
W = 寡/鳏	正确的,而且	1我完全知道、同意并理解资料的填 <i>入</i>	(°			



Family composition

Form

54

54 (Design date 10/15)

Department of Immigration and Border Protection

Are you applying for a:	Visitor visa (600)	
	Other	

Note: 1. You must complete this form in English only.

- 2. You must give details of all your family members living in your home country and abroad including half, step and adopted brothers, sisters and children (if not living, write 'Deceased' in Home address column).
- 3. If you have been assisted in completing this form, you should only sign the Declaration if the information is true and correct and has been included with your full knowledge, consent and understanding.

delicate and analysis						
Family	Family name	Given names	Date of birth	Relationship status	Home address	Previous visits to Australia
composition			DAY MONTH YEAR	(use codes below)		DAY MONTH YEAR
Yourself			, ,			
			1 1			, ,
Spouse			/ /			/ /
De facto			, ,			
Do Idolo			1 1			/ /
Father/Mother			/ /			/ /
Father/Mother			1 1			. , ,
T dation/ Would			1 1			/ /
Brother/sister			/ /			/ /
Brother/sister			1 1			, ,
			1 1			/ /
Brother/sister			/ /			/ /
Con/doughter			, ,			
Son/daughter			/ /			/ /
Son/daughter			/ /			, ,
			, ,			, ,
Son/daughter			/ /			/ /

MONTH

YEAR

'Relationship status' codes

M = Married

E = Engaged

F = De facto

S = Separated

D = Divorced

W = Widowed

N = Never married or been in a de facto relationship

Declaration

I declare that:

- the information I have given on this form is complete and correct.
- in any section of this form which has been completed with the assistance of another person, the information as set down is true and correct and has been included with my full knowledge, consent and understanding.

Signature of applicant	Signature of witness

DAY	MONTH		YEAR
	/	/	