

This Application Is For Working (Z) Visa For China , For Other Visa Services Contact Our Agent	
Visa Types	Other Services
Work Visa	Rent Office
Business Visa	Rent Apartment
Tourist Visa	Company Registration

<div>申请人个人简历及信息表 Personal Information Form</div>					<div>Photo</div>
Sur Name:		Middle Name:		Given Name:	
其他曾用姓氏		其他曾用名字		中文姓名	
OTHER SURNAME USED		OTHER FIRST AND MIDDLE NAMES USED		CHINESE NAME	
出生日期		婚姻状况		办理签证的地点（城市）	
DATE OF BIRTH(yyyy-mm-dd)		MARITAL SATUS		City Name for the Working Visa Application	
最高学位		汉语水平		是否掌握其他语言	
HIGHEST ACADEMIC DEGREE		CHINESE PROFICIENCY		PROFICIENCY OF OTHER LANGUAGE	
是否持有境外职业资格证书		职业资格证书名称和编号		申请人电子邮箱	
HAVE YOU EVER OBTAINED ANY PROFESSIONAL QUALIFICATION CERTIFICATE ABROAD?		NAME AND NUMBER OF PROFESSIONAL QUALIFICATION CERTIFICATES		E-MAIL ADDRESS	
列出所有曾授予你护照的国家		列出所有曾使用过的护照号码		与任职相关工作经验	
LIST ALL COUNTRIES THAT EVER ISSUED YOU A PASSPORT		LIST ALL PASSPORT NUMBERS THAT YOU EVER HAVE USED		RELATED WORKING EXPERIENCE AND LENGTH OF WORKING TIME	
是否曾在世界500强企业、知名金融机构或律师事务所等任职		在上述单位曾担任最高职务		公认职业成就	
DO YOU HAVE ANY EXOERIENCE IN WORLD TOP 500 COMPANIES, WELL-KNOW FINANCIAL INSTITUTIONS OR LAW FIRMS?		HIGHEST POSITION YOU HAVE EVER HELD IN AFOREMENTIONED ORGANIZATIONS		RECOGNIZED PROFESSIONAL ACHIEVEMENT	
列出曾就读的高等教育学校（自高中开始,包含）					
LIST ALL HIGHER EDUCATIONAL INSTITUTIONS YOU HAVE ATTENTED (INCLUDING VOCATIONAL INSTITUTIONS, FROM HIGH SCHOOL)					
学校名称 SCHOOL NAME	所在国家LOCATION	就读时间DATES OF ATTENDANCE	专业SPECIALITY	全日制或非全日制或远程 Full-time or Part time or Online Education	学位ACADEMIC QUALIFICATION
列出曾工作的单位					
LIST ALL EMPLOYERS YOU HAVE WORKED FOR					
公司名称 COMPANY NAME	所在国家LOCATION	起止时间 DATES	工作岗位OCCUPATION	职务JOB TITLE	工作任务JOB DESRIPTION
在华紧急联系人			与申请人关系		
EMERGENCY CONTACT PERSON IN CHINA			RELATIONSHIP TO THE APPLICANT		
联系电话			电子邮箱		
EMERGENCY CONTACT TELEPHONE NUMBER			E-MAIL ADDRESS		
您是否由于犯有任何罪行而曾经被逮捕或被判有罪，即使后来得到了赦免或收回等其他类似措施？					<input type="checkbox"/> 是 YES
HAVE YOU EVER BEEN ARRESTED OR CONVICTED FOR ANY OFFENSE OR CRIME, EVEN THOUGH SUBJECT OF A PARDON, AMNESTY OR OTHER SIMILAR LEGAL ACTION?					<input type="checkbox"/> 否 NO
您是否曾感染过对公共健康有影响的传染病或患过可能造成危险的身体疾病或精神病？					<input type="checkbox"/> 是 YES
HAVE YOU EVER BEEN AFFLICTED WITH A COMMUNICABLE DISEASE OF PUBLIC HEALTH SIGNIFICANCE OR A DANGEROUS PHYSICAL OR MENTAL DISORDER?					<input type="checkbox"/> 否 NO
您是否曾违反中国法律，被中国政府递解出境？					<input type="checkbox"/> 是 YES
HAVE YOU EVER VIOLATED THE LAW OF CHINA, AND DEPORTED FROM CHINA?					<input type="checkbox"/> 否 NO
如果有随行家属，请填写 IF have Aoompanying Family Members, please fill up the following:					
随行家属情况					
ACCOMPANYING FAMILY MEMBERS					
是否有家属随行			人数		
DO YOU HAVE ANY ACCOMPANYING MEMBER?			NUMBER OF THE ACCOMPANYING MEMBERS		
随行家属姓名NAME(As in Passport)	出生日期DATE OF BIRTH(yyyy-mm-dd)	性别GENDER	国籍NATIONALITY	与申请人关系 RELATIONSHIP TO THE APPLICANT	护照号码PASSPORT NUMBER