



Harmonised application form
Application for Schengen Visa

This application form is free

PHOTO
3.50cm x 4.50cm

Family members of the EU, EEA or CH citizens or of UK nationals who are Withdrawal Agreement beneficiaries shall not fill in fields no.21,22,30,31 and 32 (marked with*).

Fields 1-3 shall be filled in in accordance with the data in the travel document.

1. Surname (Family name): Sample value #1 for page0_field1			FOR OFFICIAL USE ONLY Date of application: Application number: Application lodged at: <input type="checkbox"/> Embassy/consulate <input type="checkbox"/> Service provider <input type="checkbox"/> Commercial intermediary <input type="checkbox"/> Border (Name): <input type="checkbox"/> Other: File handled by: Supporting documents: <input type="checkbox"/> Travel document <input type="checkbox"/> Means of subsistence <input type="checkbox"/> Invitation <input type="checkbox"/> TMI <input type="checkbox"/> Means of transport <input type="checkbox"/> Other: Visa decision: <input type="checkbox"/> Refused <input type="checkbox"/> Issued: <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> LTV <input type="checkbox"/> Valid: From: Until: Number of entries: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple Number of days:
2. Surname at birth (Former family name(s)): Sample value #2 for page0_field2			
3. First name(s) (Given name(s)): Sample value #3 for page0_field3			
4. Date of birth (day-month-year): Sample value #5 for page0_field5	5. Place of birth: Sample value #4 for page0_field4 6. Country of birth: Sample value #7 for page0_field6 7. Current nationality: Nationality at birth, if different: Sample value #6 for page0_field7 Other nationalities: Sample value #8 for page0_field8		
8. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	9. Civil status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Registered Partnership <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other (please specify):		
10. Parental authority (in case of minors) /legal guardian (surname, first name, address, if different from applicant's, telephone no., e-mail address, and nationality): Sample value #9 for page0_field32			
11. National identity number, where applicable: Sample value #10 for page0_field34			
12. Type of travel document: Sample value #11 for page0_field35 <input type="checkbox"/> Ordinary passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Official passport <input type="checkbox"/> Special passport <input type="checkbox"/> Other travel document (please specify): Sample value #12 for page0_field37			

13. Number of travel document: Sample value #15 for page1_field3	14. Date of issue: Sample value #13 for page1_field1	15. Valid until: Sample value #14 for page1_field2	16. Issued by (country): Sample value #16 for pa
17. Personal data of the family member who is an EU, EEA or CH citizen or a UK national who is a Withdrawal Agreement beneficiary, if applicable: Sample value #17 for page1_field5			
Surname (Family name): Sample value #18 for page1_field6		First name(s) (Given name(s)): Sample value #19 for page1_field7	
Date of birth (day month year): Sample value #20 for page1_field8	Nationality: Sample value #21 for page1_field9	Number of travel document or ID card: Sample value #22 for page1_field10	
18. Family relationship with an EU, EEA or CH citizen or a UK national who is a Withdrawal Agreement beneficiary, if applicable: Sample value #23 for page1_field11 <input type="checkbox"/> spouse <input type="checkbox"/> child <input type="checkbox"/> grandchild <input type="checkbox"/> dependent ascendant <input type="checkbox"/> Registered Partnership <input type="checkbox"/> other			
19. Applicant's home address and e mail address: Sample value #25 for page1_field16		Telephone no.: Sample value #24 for page1_field15	
20. Residence in a country other than the country of current nationality: <input type="checkbox"/> No <input type="checkbox"/> Yes. Residence permit or equivalent Sample value #26 No. Sample value #27 for Valid Sample value #28 for page1_field20			
*21. Current occupation: Sample value #29 for page1_field21			
* 22. Employer and employer's address and telephone number. For students, name and address of educational establishment: Sample value #30 for page1_field22			

23. Purpose(s) of the journey: Sample value #32 for page2_field1 <input type="checkbox"/> Tourism <input type="checkbox"/> Business s <input type="checkbox"/> Visiting family or friends Sample value #33 for page2_field4 <input type="checkbox"/> Cultural <input type="checkbox"/> Sports <input type="checkbox"/> Official visit Sample value #34 for page2_field8 <input type="checkbox"/> Medical reasons Sample value #35 for page2_field10 <input type="checkbox"/> Study <input type="checkbox"/> Airport transit <input type="checkbox"/> Other (please specify): Sample value #36 for page2_field13		
24. Additional information on purpose of stay: Sample value #37 for page2_field15		
25. Member State of main destination (and other Member States of destination, if applicable): Sample value #39 for page2_field17	26. Member State of first entry: Sample value #38 for page2_field16	
27. Number of entries requested: <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries Intended date of arrival of the first intended stay in the Schengen area: Intended date of departure from the Schengen area after the first intended stay: Sample value #40 for page2_field20		
28. Fingerprints collected previously for the purpose of applying for a Schengen visa: <input type="checkbox"/> No <input type="checkbox"/> Yes Date, if known Visa sticker number, if known Sample value #42 for page2_field24		
29. Entry permit for the final country of destination, where applicable: Issued by Sample value #43 for page2_fi Valid from Sample value #44 fc until Sample value #45 fc		
* 30. Surname and first name of the inviting person(s) in the Member State(s). If not applicable, name of hotel(s) or temporary accommodation(s) in the Member State(s): Sample value #46 for page2_field28		

Address and e mail address of inviting person(s)/hotel(s)/temporary accommodation(s): Sample value #48 for page3_field2	Telephone no: Sample value #47 for page3_field1	
*31. Name and address of inviting company/organisation: Sample value #49 for page3_field3		
Surname, first name, address, telephone no, and e mail address of contact person in company/organisation: Sample value #51 for page3_field5	Telephone no of company/organisation: Sample value #50 for page3_field4	
*32. Cost of travelling and living during the applicant's stay is covered: Sample value #52 for page3_field6		
<input type="checkbox"/> by the applicant himself/herself Means of support: <input type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input type="checkbox"/> Credit card <input type="checkbox"/> Pre paid accommodation <input type="checkbox"/> Pre paid transport <input type="checkbox"/> Other (please specify):	<input type="checkbox"/> by a sponsor (host, company, organisation), please specify: <input type="checkbox"/> referred to in field 30 or 31 / <input type="checkbox"/> other (please specify): / Means of support: <input type="checkbox"/> Cash <input type="checkbox"/> Accommodation provided <input type="checkbox"/> All expenses covered during the stay <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify):	
33. Surname and first name of the person filling in the application form, if different from the applicant: Sample value #53 for page3_field19		
Address and email address of the person filling in the application form: Sample value #55 for page3_field21	Telephone No: Sample value #54 for page3_field20	
I am aware that the visa fee is not refunded if the visa is refused. Sample value #56 for page3_field22		
Applicable in case a multiple entry visa is applied for: I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States. I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the application; and any personal data concerning me which appear on the application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on my application. Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the Visa Information System (VIS) for a maximum period of five years, during which it will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the		

<p>Member States, immigration and asylum authorities in the Member States for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled, of identifying persons who do not or who no longer fulfil these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will be also available to designated authorities of the Member 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 is: jointly the Ministry of Foreign and European Affairs and Trade and Identity'.</p>	
<p>I am aware that I have the right to obtain, in any of the Member States, notification of the data relating to me recorded in the VIS and of the Member State which transmitted the data, and to request that data relating to me which are inaccurate be corrected and that data relating to me processed unlawfully be deleted. At my express request, the authority examining my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have them corrected or deleted, including the related remedies according to the national law of the Member State concerned. The Office of the Information and Data Protection Commissioner (idpc.info@idpc.org.mt) will hear claims concerning the protection of personal data.</p> <p>I declare that to the best of my knowledge all particulars supplied 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.</p> <p>I undertake to leave the territory of the Member States before the expiry of the visa, if granted. I have been informed that possession of a visa is only 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 6(1) of Regulation (EU) No 2016/399 (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.</p>	
<p>Place and date:</p> <p>Sample value #57 for page4_field1</p>	<p>Signature: (Signature of parental authority/legal guardian, if applicable):</p> <p>Sample value #58 for page4_field2</p>