20002-20312427 \ 27.01.2017 14:00:47 Visa Application Center VFS (Munich)

1. Nationality (if you formerly had USSR or Russian citizenship, please indicate when and why you lost it).

BRAZIL

2. Surname (as in passport).

BUENO DE MORAES FIOR

3. First name, other names, patronimic (as in passport).

GABRIEL

4. Date of birth (dd/mm/yyyy).

31/01/1991

5. Sex.

MALE

6. Passport.

Passport No: YC110085

Date of issue: 29/03/2016

Valid until: 28/03/2026

7. Purpose of visit.

SCIENTIFIC-TECHNICAL RELATIONS

8. Category and type of visa.

COMMON HUMANITARIAN

9. Number of entries.

STNGL F

10. Date of arrival and departure.

07/03/2017 - 12/03/2017

11. Host organisation you intend to visit.

Company name:

BUDKER INSTITUTE OF NUCLEAR PHYSICS

TIN: NONE

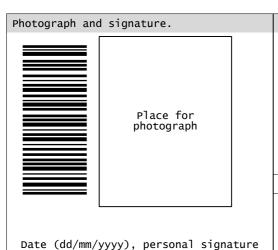
Invitation No: NONE Directive No: NONE

Address:

11, AKADEMIKA LAVRENTIEVA PROSPECT, NOVOSIBIRSK, 630090 RUSSIA

12. Route of journey (destination points).

NOVOSIBIRSK



Service information (automatically generated).

Application form recipient: Visa Application Center VFS

(Munich)

Basis (voucher, dir. No, inv. No): NONE

The estimated date of visit to the RC:

Application No (web-site): 20312427 The date of processing: 1/27/2017

Application No (VAC): The date of processing by the VAC:

Request No in Russian Consulate (RC):

I hereby agree to the processing and transfer of my personal data in electronic form for the purposes of making a decision on visa issuance. I declare that data provided in the application form are full and correct. I am aware that any false information may be a cause for the denial of visa or for the cancellation of the previously issued visa and may lead to other consequences provided for by the legislation of the Russian Federation. Subject to the receipt of visa, I pledge to leave the territory of the Russian Federation before the visa expiration date. I am aware that valid visa does not automatically allow to enter the territory of the Russian Federation. In case of denial of entry, I will not seek any compensation for potential losses.

13. Children under 16 years and other relatives written in your passport.

Do you travel with children under 16 years or other relatives written in your passport?

NO

14. Your permanent address, telephone number, fax number, E-mail.

15. Place of work or study (position, company name, address, telephone number, fax number, E-mail).

SCHAEFTLARNSTRASSE C/O JULIAN BECKER 96 81371 MUNICH, TEL: +491719714856, EMAIL: fior@mpp.mpg.de

MAX-PLANCK INSTITUTE FOR PHYSICS, RESEARCH ASSISTANT, FOEHRINGER RING 6 80805 MUNICH, TEL: +498932354, EMAIL: fior@mpp.mpg.de

number, fax number, E-mail).

16. Information about your previous trips to Russia.

How many times have you been to Russia?

Date of last trip to Russia (dd/mm/yyyy):

1

21/09/2012 - 24/09/2012

17. Information about health insurance.

Do you have health insurance that is valid in Russia?

NO

18. Other names used in the past (maiden, pen-name, religious, etc.).

NONE

19. Your place of birth (if you were born in Russia, please specify when and which country you emigrated to).

SAO PAULO, SP

20. Additional information about your relatives.

Do you currently have relatives in Russia?

NO