

## РНОТО

## **Application for a Schengen Visa to Iceland**

This application form is free

1. Surname (Family name) (x)	FOR OFFICIAL USE ONLY			
Surname at birth (Former family	Date of application:			
3. First name(s) (Given name(s)) (	x)			Visa application number:
4. Date of birth (day-month-year)	Place of birth     Country of birth	7.Current nationality Nationality at birth, if differ	rent:	Application lodged at  □ Embassy/consulate □ CAC □ Service provider □ Commercial intermediary
8. Sex  Male  Fema		Separated Divorced (	<b>)</b> Widow(er)	□ Border
				Name:
In the case of minors: Surname authority/legal guardian	e, first name, address (if different fro	om applicant's) and national	ity of parental	
				□ Other
11. National identity number, wher	File handled by:			
12. Type of travel document Ordinary passport Other travel document (please s	Supporting documents:  Travel document  Means of subsistence			
	. Date of issue 15. Valid until	16. Issued by		<ul><li>□ Invitation</li><li>□ Means of transport</li><li>□ TMI</li></ul>
17. Applicant's home address and		□ Other:		
	Visa decision: □ Refused			
18. Residence in a country other the No		□ Issued: □ A		
Yes. Residence permit or equivable 19. Current occupation	valent. No.	Valid until		□ C □ LTV
* 20. Employer and employer's add establishment.	□ Valid: From Until			
21. Main purpose(s) of the journey O Tourism O Official visit		Cultural	<b>O</b> Sports	Number of entries:  □ 1 □ 2 □ Multiple
Medical reasons Study  OTransit	Airport transit	Other (please sp	pecify)	Number of days:

22. Member State(s) of	Member State(s) of destination     23. Member State of first entry				
24. Number of entries re	•	25. Duration of the intended stay or transit Indicate number of days			
Single entry	Two entries				
Multiple entries			<u> </u>		
* The fields marked with while exercising their rig relationship and fill in fie	ght to free movement. Family me	members of EU, EEA or CH citizens (spouse, child or dependent mbers of EU, EEA or CH citizens shall present documents to	dent ascendant) prove this		
(x) Fields 1-3 shall be fil	lled in in accordance with the da	ta in the travel document.			
	ed during the past three years				
	No Yes. Date(s) of validity from to				
27. Fingerprints collected	d previously for the purpose of ap	pplying for a Schengen visa			
<ul><li>No</li></ul>	O Yes.	Date, if known			
28. Entry permit for the fi Issued by Valid from	inal country of destination, where	e applicable			
29. Intended date of arriv	val in the Cabanana area	DO Johan dad data of danaghura from the Cohon con and			
29. Intended date of aniv	vai in the Schengen area	30. Intended date of departure from the Schengen area			
	name of the inviting person(s) in on(s) in the Member State(s)	the Member State(s). If not applicable, name of hotel(s) or			
Address and e-mail addr accommodation(s)	ress of inviting person(s)/hotel(s)	/temporary Telephone and telefax			
*32. Name and address	of inviting company/organization	Telephone and telefax of company/organization			
Surname, first name, add	dress, telephone, telefax, and e-	mail address of contact person in company/organization			
*33. Cost of travelling an	d living during the applicant's sta	ay is covered			
O by the applicant hims	self/herself	by a sponsor (host, company, organization), please specify			
Means of support  Cash Traveler's cheques Credit card Pre-paid accommoda Pre-paid transport Other (please specify		☐ other (please specify)  Means of support ☐ Cash ☐ Accommodation provided ☐ All expenses covered during the stay ☐ Pre-paid transport ☐ Other (please specify)			

34. Personal data of the family member who	is an EU, EEA or CH citizen		
Surname	First name(s)		
Date of birth	Nationality	Number of travel document or ID card	
35. Family relationship with an EU, EEA or C	H citizen		
spouse child	grandchild	dependent ascendant	
36. Place and date	37. Signature (for minors, signature o guardian)	of parental authority/legal	
I am aware that the visa fee is not refunded if	the visa is refused.		
Applicable in case a multiple-entry visa is applicable in a management of the need to have an adequate		d any subsequent visits to the ter	ritory of Member States.
I am aware of and consent to the following: the the taking of fingerprints, are mandatory for the application form, as well as my fingerprints and authorities, for the purposes of a decision on m	e examination of the visa application; and any discounting the relevant of the relevant visa application.	y personal data concerning me w ant authorities of the Member Sta	thich appear on the visa ates and processed by those
Such data as well as data concerning the decisinto, and stored in the Visa Information System (authorities competent for carrying out checks or Member States for the purposes of verifying where the full of the purpose of verifying where the full of the prevention. Under certain conditions the of the prevention, detection and investigation of the processing the data is the Icelandic Directors.	VIS) for a maximum period of five years, durion visas at external borders and within the Mehether the conditions for the legal entry into, no no longer fulfil these conditions, of examine data will be also available to designated auterrorist offences and of other serious criminal	ing which it will be accessible to the moder States, immigration and asstay and residence on the territor ing an asylum application and of thorities of the Member States are all offences. The authority of the I	the visa authorities and the sylum authorities in the ry of the Member States are determining responsibility for and to Europol for the purpose
I am aware that I have the right to obtain in any which transmitted the data, and to request that deleted. At my express request, the authority e personal data concerning me and have them control The national supervisory authority of that Memiclaims concerning the protection of personal data.	data relating to me which are inaccurate be examining my application will inform me of the orrected or deleted, including the related rember State the Data Protection Authority. Pers	corrected and that data relating to e manner in which I may exercise nedies according to the national I	to me processed unlawfully be my right to check the aw of the State concerned.
I declare that to the best of my knowledge all p application being rejected or to the annulment which deals with the application.			
I undertake to leave the territory of the Membe of the prerequisites for entry into the European be entitled to compensation if I fail to comply w therefore refused entry. The prerequisites for e	territory of the Member States. The mere fa with the relevant provisions of Article 5 <sup>i</sup> of Reg	ict that a visa has been granted t gulation (EC) No 562/2006 (Sche	o me does not mean that I will engen Borders Code) and I am
Place and date	Signature (for minors, signature of pa	rental authority/legal guardian)	:
L			