

## Invitation – Before application for Schengen visa

To be filled in by persons in Sweden who wish to invite relatives or friends from abroad

Use this form if you wish to invite a relative or friend to visit you for maximum 90 days in a period of 180 days. Then send it complete with attachments (see below) by mail or scan them and send them via email to your relative or friend abroad. He or she must then submit your form with its attachments together with his or her application for Schengen visa.

Remember that you who invite must sign with your signature before sending it to your relative or friend. You will find this form and more information at [www.migrationsverket.se](http://www.migrationsverket.se) or [www.swedenabroad.se](http://www.swedenabroad.se).

### 1. Your personal details (the person who lives in Sweden and invites somebody)

Surname (Family name)		First name(s)	
Date of birth/Personal ID No. (YYYYMMDD-NNNN)		Citizenship	
Address		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Daytime telephone number		Email address	

### 2. Details regarding your employment

Only applies if you are guarantor for the invited person's travel or upkeep.

Your profession or occupation		Your employer	
Other income (pension, maintenance, etc.)		Employed since	Annual income

### 3. The applicant – the person applying for Schengen visa (the person whom you are inviting)

Surname (Family name)		First name(s)	
Previous surname(s)		Date of birth (YYYYMMDD)	
Citizenship		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Present place of residence		Country	
Daytime telephone number		Email address	

### 4. Details of the visit

When and for how long will the applicant be visiting you in Sweden?
What is the purpose of the visit?
Where will the applicant be living during the visit?

Are any other persons applying for visa at the same time as the applicant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state name(s) and date(s) of birth		

## 5. Financial details relating to the visit

Who is paying the applicant's upkeep during the visit in Sweden?		
<input type="checkbox"/> The applicant	<input type="checkbox"/> Me	<input type="checkbox"/> Another person
If someone, other than you, is paying for upkeep during the visit in Sweden, state his or her name and address here		
<i>(He or she shall show proof of income, assets and any dependants he or she has to support. Salary and other income can be proven by e.g. witnessed copies of pay slips and bank account statements. The information should be included in the applicant's application but can also be included here.)</i>		

## 6. Your relationship with the applicant

Are you related to the applicant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state in what way		
If no, how do you know one another?		
How long have you known one another?		

## 7. Personal details of the applicant

Marital status	
<input type="checkbox"/> Unmarried <input type="checkbox"/> Married (Including registered partner) <input type="checkbox"/> Engaged <input type="checkbox"/> Divorced <input type="checkbox"/> Cohabit <input type="checkbox"/> Widowed	
State the name of the applicant's husband or wife or partner.	
How does the applicant support him or herself in his or her home country?	Profession or occupation
If the applicant works	
Employer	Employed since
Type of leave	
<input type="checkbox"/> Holiday <input type="checkbox"/> Leave of absence <input type="checkbox"/> Has resigned <input type="checkbox"/> Other, specify:	
If the applicant is studying – State type of leave	
<input type="checkbox"/> Study break <input type="checkbox"/> School holidays <input type="checkbox"/> Other, specify:	
Has the applicant been in Sweden during the last five-year period?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state when	
Does the applicant have relatives who live in Sweden?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state name, age, citizenship and in what way he or she is related to these persons	
Does the applicant have travel medical insurance for the journey and stay in Sweden?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where will he or she travel after visiting Sweden?	Has he or she permission to travel into that country?

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- Copy of your ID-card, passport or equivalent, which proves your identity
- Population registration certificate "Invitation", obtainable from the Swedish Tax Office and not older than 3 months
- Documents which show details of income and assets for you or the person who pays for the applicant's upkeep during the visit in Sweden (for example pay slips or bank statements for the past three months, pension statement or equivalent).

I am aware of and consent to the following: the collection of the data required by this invitation form and any personal data concerning me which appear on the invitation form will be supplied to the relevant authorities of the Member States and processed by those authorities for the purposes of a decision on the visa application.

Such data will be entered into, and stored in the Visa Information System (VIS) (1) 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 Member States, immigration and asylum authorities in the Member States. 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.

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 the 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 requesting this invitation 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 national law of the State concerned. The authority of the Member State responsible for processing the data is: The Swedish Migration Agency, 601 70 Norrköping, Sweden, [www.migrationsverket.se](http://www.migrationsverket.se).

The Swedish Authority for Privacy Protection is the national supervisory authority ([www.imy.se](http://www.imy.se)) and they will hear claims concerning the protection of personal data.

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 may render me liable to prosecution under the law of the Member State which deals with the application.

Place and date	Signature
<i>A person who provides incorrect information in the application, or knowingly omits information that is of importance, can be fined or sentenced to imprisonment. See Chapter 20, section 6, paragraph 2 of the Aliens Act (2005:716).</i>	

**NOTE!** Fill in the form and send it with its attached documents to the applicant.