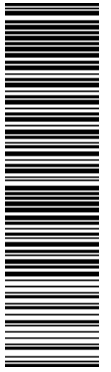


Mail documents to: VisaHQ.co.uk Ltd.  
24 Tufton Street  
London SW1P 3RB  
Tel: 4420 4577 3307



## Portugal Tourist visa Application



### Please enter your contact information

Name:

Email:

Tel:

Mobile:

The latest date you need your passport returned in time for your travel:

**When applying for a Schengen visa please select the destination you will be staying in for the lengthiest time as you will be required to submit an application to the consulate of the country you will be staying in for the longest duration.**

**Important :** From 20 November 2015 every applicant aged 12 years and over must attend a biometrics appointment (10-digit finger scans and digital photograph to be taken) when applying for a visa for Portugal.

**VisaHQ is able to assist the client with checking and reviewing application form to ensure accuracy and meeting with the requirements of the visa process, also we will assist you personally during the appointment not to queue up, and will collect your passport.**

Upon placing your order, our visa specialist will contact you directly to talk through the process in more detail, determine if biometrics are required and if so, to arrange with you the most convenient time for you to attend the appointment at the Visa Application Centre.



### Portugal tourist visa checklist

☐

**Filled out and signed Portugal tourist visa application form.** The form is enclosed.

☐

**Original Passport.** Passport must have at least 6 months remaining validity and have at least 1 visa page.

☐

**Passport-type photograph:** Include a passport style photo, with a white background, taken within the last 6 months. You may also choose to upload a photo to your order for us to print. There is a charge associated with this service.

☐

**Payment.** Credit Card Authorization form, Postal Order payable to **VisaHQ.co.uk**.

☐

**Return mailer.** Prepaid self-addressed return label or payment for Royal Mail.

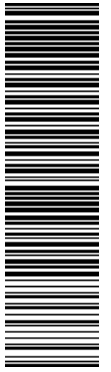
☐

**Proof of Status.** UK Residence permit, endorsed in the passport or issued as a Biometrics card, must be valid for at least 90 days beyond the return date of the trip to the Schengen Area; C type visitor visa is not acceptable.

☐

**Previous visas.** Scanned copies of any previous Schengen visas which have been issued to the applicant.

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☐ **Travel insurance.** Overseas insurance policy, stating the name of the applicant and day interval. It must cover all risks expected during the time of stay inside the Schengen area, offering a minimum coverage of 30.000 €, including repatriation. Conditions must be stated either on insurance document or on separate confirmation letter.

The insurance should be taken out in the United Kingdom, but if that is not possible, insurance can be taken out elsewhere.

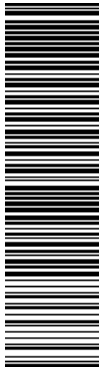
☐ **Proof of employment.**

- **Employer letter** (original – scanned copy): recent (less than 1 month old), signed, headed letter (addressed to the Mission, name and position of the signee and confirming applicant's employment) and last month's Payslip.
- **Student letter** (original – scanned copy): recent (less than 1 month old), signed, UK school/college/university letter (addressed to the Mission, name and position of the signee and confirming applicant's enrolment)
- **Self-Employment letter** (original): recent (less than 1 month old), signed, headed letter (addressed to the Mission, name and position of the signee and confirming applicant's self-employment) and obtained from (if applicable):
  - applicant's accountant: when applicant's company's accountancy is done by an external/independent accountant
  - solicitor: when applicant's company has been registered by a solicitor
  - bank manager: when applicant's company has a business bank account
  - Companies House: Certificate of Incorporation received upon registering business: if applicant's name is not mentioned on certificate, then additional proof demonstrating connection applicant – company should be provided
  - HMRC letter
- **Unemployed/retired:**
  - Receiving Benefits: recent original letter obtained from local Jobcentre or Pension Service
  - Housewife/man (only applicable to married couples): applicant's may be sponsored by their spouse/registered partner; in these cases the following needs to be provided:
    1. marriage certificate (original + copy): when this document was issued outside the EU and is not in English, Greek or Turkish, then it should be translated by a certified translator in the UK
    2. spouse/registered partner's passport (original + copy)
    3. spouse/registered partner's proof of occupation (as in B.1.a, b or c)
    4. spouse/registered partner's proof of funds
    5. spouse/registered partner's cover letter (signed & dated) confirming sponsorship

☐ **Proof of sufficient funds.** • Latest 3 months UK bank statements showing applicant's name, address and an end balance dated within the last month on the visa application submission date; balance needs to show a minimum amount of £ 50.00/day of stay in Cyprus + outstanding accommodation and travel fees (alternatively online bank account printouts are also accepted)

• Travellers' cheques covering the same amount as explained under a.

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☐ **Proof of travel.** • Confirmed return travel tickets: mentioning applicant's name and travel dates to & from Cyprus. Flights are only accepted when they are fully booked and confirmed, arriving and departing from either Larnaka or Paphos airports. Flights booked through Ercan airport are not accepted.

• When travelling by car: car registration, car insurance, return travel tickets (ferry) mentioning the car's registration number and driver's driving licence. If applicant is not the driver, then driver's cover letter (signed & dated) confirming joint travel with applicant and travel dates need to be provided too.

☐ **Proof of accommodation.** • Confirmed pre-paid accommodation must be provided with the application and the accommodation must be in a government-controlled area. Accommodation in North Cyprus will not be accepted unless recognized by the Republic of Cyprus. Accommodation must mention applicant's name, travel dates and accommodation address details.

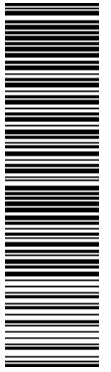
• If the applicant's name is not mentioned on the accommodation reservation, then a joint travel confirmation letter, signed and dated by the person whose name is the confirmed booking, must also be provided along with a photocopy of that same person's passport/ID card + passport signature page, if signature is not on passport's bio page.

• When accommodation is confirmed for a group, then a list with the names of the group members will also be required; alternatively the group members their names may also be mentioned on the travel ticket.

If you wish to prepay return shipping, please add the shipping fee to the total and provide return address:

- |                                                                                                          |                     |
|----------------------------------------------------------------------------------------------------------|---------------------|
| <input type="checkbox"/> Royal Mail Special Delivery by 1 pm (Next Day) - from £11                       | <b>Name:</b>        |
| <input type="checkbox"/> Same day Central London courier delivery - from £15                             | <b>Company:</b>     |
| <input type="checkbox"/> Royal Mail Special Delivery by 9 am (Next Day) - from £25                       | <b>Address:</b>     |
| <input type="checkbox"/> Royal Mail Special Delivery Saturday Guarantee before 1pm (Next Day) - from £25 | <b>City:</b>        |
| <input type="checkbox"/> Same Day Outside Central London - from £30                                      | <b>Postal code:</b> |
| <input type="checkbox"/> UK Next Day courier delivery - from £35                                         |                     |
| <input type="checkbox"/> Royal Mail Special Delivery Saturday Guarantee before 9am (Next Day) - from £35 |                     |
| <input type="checkbox"/> VHQ same day Central London - from £40                                          |                     |
| <input type="checkbox"/> Airport Service MEET&GREET - from £75                                           |                     |
| <input type="checkbox"/> Airport Delivery HEATHROW - from £80                                            |                     |
| <input type="checkbox"/> Airport Delivery GATWICK - from £90                                             |                     |
| <input type="checkbox"/> Prepaid self addressed mailer - £0                                              |                     |
| <input type="checkbox"/> Local pick up in London - £0                                                    |                     |

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**Note:**

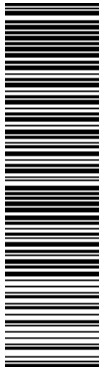
Applicant(s) under 18: if the minor applicant is traveling alone, with only one parent or with other people than the parents or guardian, then a birth certificate and his/her both parents' or legal guardians' formal written consent to travel and copy of the passport(s) must be provided.

Please note that you must reside in one of the counties listed below to be eligible to apply in the Portugal Visa Application Centre in London: Bedfordshire, Berkshire, Bristol, Buckinghamshire, Cambridgeshire, City of London, Cornwall, Devon, Dorset, East Suffolk, East Sussex, Essex, Gloucestershire, Greater London, Hampshire, Hertfordshire, Huntingdon and Peterborough, Huntingdonshire, Isles of Bermudas, Isles of Canal (Jersey e Guernsey), Isle of Ely, Isle of Scilly, Isle of Wight, Kent, Middlesex, Norfolk, Oxfordshire, Soke of Peterborough, Somerset, Suffolk, Surrey, Sussex, West Suffolk, West Sussex, Wiltshire

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**Visa applications should be submitted for a maximum of 6 months, and no later than 15 days, before the trip.**

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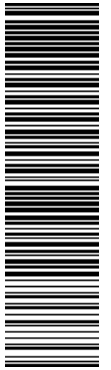


## Portugal Tourist visa Application

|  | Type of visa          | Validity      | Processing time                | Embassy fee | Service fee | VAT    | Total   |
|--|-----------------------|---------------|--------------------------------|-------------|-------------|--------|---------|
|  | Single/Multiple entry | up to 90 days | 10-15 bus. days after appoint. | £103.79     | £160.00     | £32.00 | £295.79 |

This order is subject to Terms of Service, posted on VisaHQ website.  
All fees and requirements may change without notice.

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Tel: 4420 4577 3307



## Credit card authorization form

**By signing this form i accept VisaHQ.co.uk Terms of Service and authorize to charge my credit card for the amount of £**

Name on the Credit Card:

Credit card number:

-

-

-

Exp. date:

/

CVC:

Credit Card Billing Address:

Signature:

Comments:

**Thank you!**  
**We accept all major credit cards.**



# Harmonised application form

## Application for Schengen Visa

This application form is free



Family members of EU, EEA or CH citizens 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)                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               | FOR OFFICIAL USE ONLY<br>Date of application:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 2. Surname at birth (Former family name(s))                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 3. First name(s) (Given name(s))                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 4. Date of birth (day-month-year)                                                                                                                                                                                                                                                                                        | 5. Place of birth<br><br>6. Country of birth                                                                                                                                                                                                                                                 |                                      | 7. Current nationality<br><br>Nationality at birth, if different:<br><br>Other nationalities: | Application lodged at<br><input type="checkbox"/> Embassy/consulate<br><input type="checkbox"/> Service provider<br><input type="checkbox"/> Intermediary<br><input type="checkbox"/> Border (Name): .....<br><input type="checkbox"/> Other<br><br>File handled by:<br>Supporting documents:<br><input type="checkbox"/> Travel document<br><input type="checkbox"/> Means of subsistence<br><input type="checkbox"/> Invitation<br><input type="checkbox"/> TMI<br><input type="checkbox"/> Means of transport<br><input type="checkbox"/> Other:<br><br>Visa decision:<br><input type="checkbox"/> Refused<br><input type="checkbox"/> Issued:<br><input type="checkbox"/> A<br><input type="checkbox"/> C<br><input type="checkbox"/> LTV<br><input type="checkbox"/> Valid:<br>From<br>Until<br><br>Number of entries:<br><input type="checkbox"/> 1 <input type="checkbox"/> Multiple |
| 8. Sex<br><input type="checkbox"/> Male <input type="checkbox"/> Female                                                                                                                                                                                                                                                  | 9. Civil status<br><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/legal guardian: Surname, first name, address (if different from applicant's), telephone no., e-mail address, and nationality                                                                                                                                                                      |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 11. National identity number, where applicable                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 15. Number of travel document                                                                                                                                                                                                                                                                                            | 16. Date of issue                                                                                                                                                                                                                                                                            | 17. Valid until                      | 18. Issued by ( <u>country</u> )                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 12. 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 |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 13. Family relationship with an EU, EEA or CH citizen<br><input type="checkbox"/> spouse ..... <input type="checkbox"/> child ..... <input type="checkbox"/> grandchild ..... <input type="checkbox"/> dependent ascendant<br><input type="checkbox"/> Registered Partnership ..... <input type="checkbox"/> other       |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 14. Type of travel document<br><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<br><input type="checkbox"/> Other travel document (please specify) |                                                                                                                                                                                                                                                                                              |                                      |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 19. Applicant's home address and e-mail address                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                      | Telephone number(s)                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

<sup>1</sup> No logo is required for Norway, Iceland, Liechtenstein and Switzerland.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 20. Residence in a country other than the country of current nationality<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes. Residence permit or equivalent ..... No. .... Valid until .....                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| *21. Current occupation                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| * 22. Employer and employer's address and telephone number. For students, name and address of educational establishment                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 23. (...) Purpose(s) of the journey:<br><input type="checkbox"/> Tourism..... <input type="checkbox"/> Business..... <input type="checkbox"/> Visiting family or friends ..... <input type="checkbox"/> Cultural ..... <input type="checkbox"/> Sports .....<br><input type="checkbox"/> Official visit <input type="checkbox"/> Medical reasons <input type="checkbox"/> Study <input type="checkbox"/> Airport transit ..... <input type="checkbox"/> Other (please specify): |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 24. Additional information on purpose of stay:                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 25. Member State(s) of main destination (and other Member States of destination , if applicable)                                                                                                                                                                                                                                                                                                                                                                                | 26. Member State of first entry                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 27. Number of entries requested<br><br><input type="checkbox"/> Single entry <input type="checkbox"/> Multiple entries<br><br>Duration of the intended stay (indicate number of days):<br>Intended date of arrival in the Schengen area:<br>Intended date of departure from the Schengen area:                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 28.Fingerprints collected previously for the purpose of applying for a Schengen visa or a [touring visa]<br><input type="checkbox"/> No <input type="checkbox"/> Yes.<br>Date, if known ..... Visa sticker number, if known .....                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 29. Entry permit for the final country of destination, where applicable<br>Issued by ..... Valid from ..... until .....                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| * 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)                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Address and e-mail address of inviting person(s)/hotel(s)/temporary accommodation(s)                                                                                                                                                                                                                                                                                                                                                                                            | Telephone and telefax                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| *31. Name and address of inviting company/organisation                                                                                                                                                                                                                                                                                                                                                                                                                          | Telephone and telefax of company/organisation                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| Surname, first name, address, telephone , telefax, and e-mail address of contact person in company/organisation                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| *32. Cost of travelling and living during the applicant's stay is covered:                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| <input type="checkbox"/> by the applicant himself/herself<br><br>Means of support<br><input type="checkbox"/> Cash<br><input type="checkbox"/> Traveller's cheques<br><input type="checkbox"/> Credit card<br><input type="checkbox"/> Pre-paid accommodation<br><input type="checkbox"/> Pre-paid transport                                                                                                                                                                    | <input type="checkbox"/> by a sponsor (host, company, organisation), please specify<br>..... <input type="checkbox"/> referred to in field 32 or 33<br>..... <input type="checkbox"/> other (please specify)<br><br>Means of support<br><input type="checkbox"/> Cash<br><input type="checkbox"/> Accommodation provided<br><input type="checkbox"/> All expenses covered during the stay<br><input type="checkbox"/> Pre-paid transport<br><input type="checkbox"/> Other (please specify) |  |



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--|
| <input type="checkbox"/> Other (please specify)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |  |
| I am aware that the visa fee is not refunded if the visa is refused.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                               |  |
| Applicable in case a multiple-entry visa is applied for:<br>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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                               |  |
| <p>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 visa application; and any personal data concerning me which appear on the visa 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 visa application.</p> <p>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 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 the terrorist offences and of other serious criminal offences. The authority of the Member State responsible for processing the data is: [(.....)].</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 State concerned. The national supervisory authority of that Member State [contact details: .....]</p> <p>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> |                                                                               |  |
| Place and date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Signature<br>(signature of parental authority/legal guardian, if applicable): |  |

“