

This application form should be filled out in English
此表格必须以英文填写
(Sample/样版)

PHOTO
照片



Schengen Visa Application form
申根签证申请表

This application form is free
此表格免费提供

1. Surname (Family name) (x) 姓 ZHANG				For official use only 签证机关专用			
2. Surname at birth (x) 出生时姓氏 ZHANG							
3. First name (s) (Given name (s)) (x) 名 Xiao Ming				Date of application:			
4. Date of birth (day-month-year) 出生日期 (日-月-年) 28-05-1980		5. Place of birth / 出生地 Shanghai		7. Current nationality / 现国籍 Chinese		Visa application number:	
		6. Country of birth / 出生国 China		Nationality at birth, if different 出生时国籍, 如与现国籍不同		Application lodged at <input type="checkbox"/> Embassy/consulate <input type="checkbox"/> CAC <input type="checkbox"/> Service provider <input type="checkbox"/> Commercial intermediary <input type="checkbox"/> Border	
8. Sex / 性别 <input checked="" type="checkbox"/> Male / 男 <input type="checkbox"/> Female / 女		9. Marital status / 婚姻状况 <input checked="" type="checkbox"/> Single / 未婚 <input type="checkbox"/> Married / 已婚 <input type="checkbox"/> Separated / 分居 <input type="checkbox"/> Divorced / 离异 <input type="checkbox"/> Widow (er) / 丧偶 <input type="checkbox"/> Other / 其它		Name:			
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority / legal guardian / 未成年申请人须填上合法监护人的姓名、住址(如与申请人不同)、及国籍				<input type="checkbox"/> Other			
11. National identity number, where applicable 身份证号码, 如适用 310101198005281234				File handled by:			
12. Type of travel document 护照种类: <input checked="" type="checkbox"/> Ordinary passport / 普通护照 <input type="checkbox"/> Diplomatic passport / 外交护照 <input type="checkbox"/> Service passport / 公务护照 <input type="checkbox"/> Official passport / 因公护照 <input type="checkbox"/> Special passport / 特殊护照 <input type="checkbox"/> Other (please specify) / 其它旅行证件 (请注明):				Supporting documents: <input type="checkbox"/> Travel document <input type="checkbox"/> Means of subsistence <input type="checkbox"/> Invitation <input type="checkbox"/> Means of transport <input type="checkbox"/> TMI <input type="checkbox"/> Other:			
13. Number of travel document 旅行证件编号 E12345678	14. Date of issue 签发日期 25-05-2013	15. Valid until 有效期至 24-05-2023	16. Issued by 签发机关 Exit & Entry Administration MPS			Visa decision: <input type="checkbox"/> Refused <input type="checkbox"/> Issued: <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> LTV <input type="checkbox"/> Valid: From..... Until.....	
17. Applicant's home address and e-mail address 申请人住址及电子邮件 Rm 101 No. 1 Lane 23 Xujiahui Rd, Huangpu Dist, Shanghai xiaoming@123.com			Telephone number(s) 电话号码 13800000000			Number of entries: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple	
18. Residence in a country other than the country of current nationality 是否居住在现时国籍以外的国家 <input checked="" type="checkbox"/> No 否 <input type="checkbox"/> Yes. Residence permit or equivalent No Valid until..... 是。 居留证 编号 有效期至							
*19. Current occupation 现职业 General Manager							
*20. Employer and employer's address and telephone number. For students, name and address of educational establishment. 工作单位名称, 地址和电话, 学生填写学校名称及地址 ABCD Co., Ltd 2F Guangfa Bank Tower, No. 555 Xujiahui Rd, Huangpu Dist, Shanghai 021-33303033							
21. Main purpose(s) of the journey: 旅程最主要目的地 <input checked="" type="checkbox"/> Tourism / 旅游 <input type="checkbox"/> Business / 商务 <input type="checkbox"/> Visiting Family or Friends / 探亲访友 <input type="checkbox"/> Cultural / 文化 <input type="checkbox"/> Sports / 体育 <input type="checkbox"/> Official visit / 官方访问 <input type="checkbox"/> Medical reasons / 医疗 <input type="checkbox"/> Study / 学习 <input type="checkbox"/> Transit / 过境 <input type="checkbox"/> Airport transit / 机场过境 <input type="checkbox"/> Other (please specify) / 其它 (请注明)				Number of days:			

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<input checked="" type="checkbox"/> by the applicant himself/herself / 由申请人支付 Means of support / 支付方式 <input checked="" type="checkbox"/> Cash / 现金 <input type="checkbox"/> Traveller's cheques / 旅行支票 <input checked="" type="checkbox"/> Credit card / 信用卡 <input type="checkbox"/> Prepaid accommodation / 预缴住宿 <input type="checkbox"/> Prepaid transport / 预缴交通 <input type="checkbox"/> Other (please specify) / 其它(请注明)		<input type="checkbox"/> by a sponsor (host, company, organisation), please Specify / 由赞助人(邀请人、公司或机构)支付, 请注明 <input type="checkbox"/> referred to in field 31 or 32 / 参照字段31 及32 <input type="checkbox"/> other (please specify) / 其它(请注明) Means of support / 支付方式 <input type="checkbox"/> Cash / 现金 <input type="checkbox"/> Accommodation provided / 提供住宿 <input type="checkbox"/> All expenses covered during the stay / 支付旅程期间所有开支 <input type="checkbox"/> Prepaid transport / 预缴交通 <input type="checkbox"/> Other (please specify) / 其它(请注明)	
34. Personal data of the family member who is an EU, EEA or CH citizen 家庭成员为欧盟、欧洲经济区或瑞士公民, 请填写其个人信息			
Surname 姓		First name(s) 名	
Date of birth / 出生日期	Nationality / 国籍	Number of travel document or ID card 旅行证件或身份证编号	
35. Family relationship with an EU, EEA or CH citizen 申请人与欧盟、欧洲经济区或瑞士公民的关系 <input type="checkbox"/> spouse 配偶 <input type="checkbox"/> child 子女 <input type="checkbox"/> grandchild 孙子女 <input type="checkbox"/> dependent ascendant 受养人			
36. Place and date / 地区及日期 Shanghai 05-Aug-2014		37. Signature (for minors, signature of parental authority/legal guardian) 签字 (未成年人由其监护人代签) (signature here, the same with your passport/签字与护照一致)	

I am aware that the visa fee is not refunded if the visa is refused / 本人知道即使签证被拒也不能退还签证费

Applicable in case a multiple-entry visa is applied for (cf. field No24): / 适用于申请多次入境签证 (参照字段24) 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 Status.
本人知道须预备有足够保额的旅游医疗保险作为首次及其后各次出发到申根国家领域之用

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.

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 fulfill these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will be also available to designated authorities of the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. The authority of the Member State responsible for processing the data is: *Ministry of Citizen Protection, Greek Police, International Police Cooperation Division, 3rd Division SIRENE, Kanelloupolou 4, GR-101 77 Athens, Tel.: +30.210.6977000, Fax:+30.210.6929764, Email: info@sirene-gr.com*

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 processing 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 [Hellenic Data Protection Authority, Kifisias str 1-3, 1st floor, GR-115 23 Athens, Tel.:+30.210.6475600, Fax:+30.210.6475628, E-mail: contact@dpa.gr] will hear claims concerning the protection of personal data.*

I declare that to the best of my knowledge all particulars supplied by me are corrected and completed. 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.

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 5(1) of Regulation (EC) No 562/2006 (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.

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本人知悉并同意以下条款：该申请表中所有关于本人的个人信息、照片或采集的指纹样本均为审核本人的签证所需。本人在该申请表中所填写的所有个人信息、指纹样本和照片均可提供给申根国家的相关主管部门，以便其受理本人的签证申请并对申请作出决定。

该信息以及签证结果甚或签证注销、撤销或延期的决定将一并收录到签证信息系统(1) (VIS系统) 并最长保存五年，在此期间，有根成员国的相关签证部门、边境及境内的签证检查部门以及移民局和难民局均有权登入VIS系统，核查签证申请人是否已满足入申根国境并在境内逗留的相应前提件；核实不满足或不再满足该前提条件的签证申请人；审核难民申请并确定出该申请的主管部门。必要时，各申根成员国的特定部门以及欧盟刑警组织均有权参考该信息，用于预防、侦察和调查恐怖活动及其它严重犯罪行为。希腊负责管理该类信息的部门是居民保护部，希腊警察局，国际警察合作司，第三处SIRENE，雅典Kanellopoulou 4, GR-101 77，电话：+30.210.6977000，传真：+30.210.6929764，Email: info@sirene-gr.com。

本人知悉本人有权要求任何一个申根成员国告知VIS系统中都收录了本人哪些个人信息，是由哪个申根成员国收录进去的。除此之外，本人亦有权申请更正系统中收录的错误信息并删除不合法信息。审核本人签证申请的领事机构会应本人要求提供相关说明性信息，如签证申请人应如何行使审核个人信息的权力，依据相关申根成员国的法律规定要求更正甚或删除不正确的个人信息的权力以及如何行使向相关申根成员国的主管部门(希腊数据保护机构，雅典Kifisias str 1-3, 1st floor, GR-115 23, 电话：+30.210.6475600，传真：+30.210.6475628, E-mail: contact@dpa.gr)就个人信息保护事宜依法申诉的权力。

本人确保以上信息均系本人如实提供，确保信息正确而完整。本人知悉提供虚假信息可导致本人签证申请被拒签或已得到的签证被注销甚或受理本人签证的申根国会因此而对本人追究刑事责任。

如本人的签证申请被批准，本人有义务在在签证到期前离开申根国境。本人亦获悉得到签证仅是具备了进入申根国境的前提条件之一，如果本人因未满足编号为EC562/2006 的欧洲共同体协定中第5 条第1 款中所述前提条件而被拒绝入境，本人不得要求赔偿。在进入申根成员国的领土时，入境条件将被再次审核。

Place and date / 地区及日期 Shanghai 05-Aug-2014	Signature (for minors, signature of parental authority/legal guardian) 签字 (未成年人由其监护人代签) (signature here, the same with your passport/签字与护照一致)
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(1) In so far as the VIS is operational+

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