

Harmonised application form Application for Schengen Visa

This application form is free¹

РНОТО

Family members of EU, EEA or CH citizens or of UK nationals who are beneficiaries of the EU – UK Withdrawal Agreement 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			
		Date of application:		
2. Surname at birth (Former family na	Application number:			
3. First name(s) (Given name(s)):		Application lodged at:		
5. I list hame(s) (Given hame(s)).				
Date of birth (day-month-year):	5. Place of birth:6. Country of birth:	7.Current nationality: Nationality at birth, if different:	□Embassy/consulate □ Service provider □ Commercial intermediary □ Border (Name):	
		Other nationalities:	□ Other:	
8. Sex:			File handled by:	
o. Sex.	9. Civil status:		G. d. 1	
□ Male	□ Single □ Married □	☐ Registered Partnership	Supporting documents:	
□ Female	□ Separated □ Divorced	□ Means of subsistence		
□ Other	☐ Other (please specify):		□ Invitation	
Other	d other (piease speerly).	☐ TMI ☐ Means of transport		
10. Parental authority (in case of mino from applicant's, telephone no., e-mai	□ Other:			
		Visa decision:		
		□ Refused		
		□ Issued: □ A		
11. National identity number, where a	pplicable:		□ C	
		□ LTV		
12. Type of travel document:			_ 17-1: 1.	
☐ Ordinary passport	☐ Diplomatic passport	□ Service passport	□ Valid: From:	
		Service pussport	Until:	
□ Official passport				
☐ Other travel document (please speci	Number of entries: □ 1 □ 2 □ Multiple			
			Number of days:	

No logo is required for Norway, Iceland, Liechtenstein and Switzerland.

								-
13.Number of travel docur	ment:	14. Date of issue:		15. Valid until:		16. Issued by (country):		
17. Personal data of the family member who is an EU, EEA or CH citizen or a UK national who is beneficiary of the EU – UK Withdrawal Agreement, if applicable								
Surname (Family name): First name(s) (Given name(s)):								
Date of birth (day-month-y					Number of travel document or ID card:			
18. Family relationship wi	th an EU	, EEA or CH	citizen if a	pplicable:				
= -	□ child □ grandchild □ dependent ascendant							
☐ Registered Partnership	agg and a		□ other:			Tal.		-
19. Applicant's home addre	ess and e	e-mail addres	S:			Tel.:		
20. Residence in a country	other th	an the countr	v of curren	t nationalit	v:			-
□ No			<i>y</i>		<i>J</i> -			
☐ Yes. Residence permit o	r equiva	lent	No			. Valid unt	il	
*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:								
□ I ourism □ B	Tourism Business Visiting family or friends Cultural							
□ Sports □ Official visit □ Medical reasons □ Study								
□ Airport transit □ Other (please specify):								
24. Additional information on purpose of stay:								
25. Member State of main of destination, if applicable		ion (and othe	r Member S	States		26. Mem entry:	ber State of first	
27. Number of entries requested:								
□ Single entry		Two entries			\Box N	Iultiple en	tries	
Intended date of arrival of the first intended stay in the Schengen area:								
Intended date of departure from the Schengen area after the first intended stay:								

28. Fingerprints collected previously for the purpose of applying for	a Schengen visa:			
□ No				
☐ Yes. Date, if known:				
Visa sticker number, if known				
29. Entry permit for the final country of destination, where applicable:				
Issued by Valid from	until			
•				
* 30. Surname and first name of the inviting person(s) in the Member name of hotel(s) or temporary accommodation(s) in the Member State		plicable,		
Address and e-mail address of inviting person(s)/hotel(s)/temporary accommodation(s):	Telephone No.:			
*31. Name and address of inviting company/organisation:				
Surname, first name, address, telephone no., and e-mail address of contact person in company/organisation:	nisation:			
*32. Cost of travelling and living during the applicant's stay is covered	ed:			
□ by the applicant himself/herself	□ by a sponsor (
	company, organiplease specify:	ompany, organisation),		
Means of support:	please specify.			
□ Cash □ referred to in field 30 or 31				
□ Traveller's cheques □ Credit card	□ other (please s			
□ Pre-paid accommodation□ Pre-paid transport				
☐ Other (please specify)	Means of suppor	t:		
a siner (preuse speerly)	□ Cash			
	□ Accommodati			
	☐ All expenses of during the stay	overed		
	□ Pre-paid trans	oort		
	□ Other (please			

33. Surname and first name of the person filling in the application form, if different from the applicant:				
Adress and email address of the person filling in the application form:	Telephone No.:			
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: 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.				
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 application; and any personal data concerning me which appear on the 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 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 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 terrorist offences and of other serious criminal offences. The authority of the Member State responsible for processing the data: Ministry of Foreign Affairs, Loretánské náměstí 5, CZ-118 00 Praha 1; Directorate of Alien Police, Olšanská 2, P.O. BOX 78, CZ-130 51 Praha 3 and Ministry of the Interior, Nad Štolou 3, CZ-170 34 Praha 7.				
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 Member State concerned. The national supervisory authority of that Member State: Office for Personal Data Protection, Pplk. Sochora 727/27, CZ-170 00 Praha 7, 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 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 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.				
Place and date:	Signature of applicant: (Signature of parental authorit/legal guardian, if applicable):			