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ФОТО

Образец!
НЕ ЗАПОЛНЯТЬ

Stamp Embassy
or Consulate

Application for Schengen Visa

This application form is free

1. Surname(s) (family name(s)) ФАМИЛИЯ		FOR EMBASSY/ CONSULATE USE ONLY	
2. Surname(s) at birth (earlier family name(s)) ФАМИЛИЯ ПРИ РОЖДЕНИИ (ЕСЛИ ОНА МЕНЯЛАСЬ)		Date application: НЕ ЗАПОЛНЯТЬ!	
3. First names (given names) ИМЯ		File handled by:	
4. Date of birth (year-month-day) ДАТА РОЖДЕНИЯ	5. ID-number (optional) НЕ ЗАПОЛНЯТЬ	Supporting documents:	
6. Place and country of birth МЕСТО РОЖДЕНИЯ И СТРАНА РОЖДЕНИЯ		Valid passport	
7. Current nationality/ies НАСТОЯЩЕЕ ГРАЖДАНСТВО	8. Original nationality (nationality at birth) ГРАЖДАНСТВО ПРИ РОЖДЕНИИ	Financial means	
9. Sex ПОА <input type="checkbox"/> МУЖ. Male <input type="checkbox"/> ЖЕН. Female	10. Marital status <input type="checkbox"/> Незамужен Single <input type="checkbox"/> Женат Married <input type="checkbox"/> Разведен Separated <input type="checkbox"/> Разведен Divorced <input type="checkbox"/> Вдова(а) Widow(er) <input type="checkbox"/> Other Семейное положение	Invitation	
11. Father's name ФАМИЛИЯ И ИМЯ ОТЦА	12. Mother's name ФАМИЛИЯ И ИМЯ МАТЕРИ	Means of transport	
13. Type of passport: <input type="checkbox"/> Национальный National passport <input type="checkbox"/> Дипломат. Diplomatic passport <input type="checkbox"/> Служебный Service passport <input type="checkbox"/> Проездной документ Travel document (1951 Convention) <input type="checkbox"/> Alien's passport <input type="checkbox"/> Seaman's passport ПАСПОРТ МОРСКОГО <input type="checkbox"/> Other travel document (please specify): другой тип		Health insurance	
14. Number of passport НОМЕР ПАСПОРТА	15. Issued by КАКИМ ОРГАНОМ ВЫДАН ПАСПОРТ	Other:	
16. Date of issue ДАТА ВЫДАЧИ ПАСПОРТА	17. Valid until СРОК ДЕЙСТВИЯ ПАСПОРТА	To	
18. If you reside in a country other than your country of origin, have you permission to return to that country? <input type="checkbox"/> No <input type="checkbox"/> Yes, (number and validity)		Visa:	
* 19. Current occupation НАСТОЯЩАЯ ПРОФЕССИЯ, ЗАНИМАЕМАЯ ДОЛЖНОСТЬ		Refused	
* 20. Employer and employer's address and telephone number. For students, name and address of school МЕСТО РАБОТЫ (ДЛЯ СТУДЕНТОВ -- МЕСТО УЧЁБЫ)		Granted	
21. Main destination МЕСТО НАЗНАЧЕНИЯ		Characteristics of Visa:	
22. Type of visa ТИП ВИЗЫ <input type="checkbox"/> Транзит в аэропорт Airport transit <input type="checkbox"/> Транзит ТРАНСИТ Transit <input type="checkbox"/> Short stay КРАТКОСРОЧНАЯ Short stay <input type="checkbox"/> Long stay ДОЛГОСРОЧНАЯ Long stay		LTV	
23. Visa ВИЗА <input type="checkbox"/> Individual индивидуальная Individual <input type="checkbox"/> Collective коллективная Collective		A	
24. Number of entries requested КОЛИЧЕСТВО ВЪЕЗДОВ <input type="checkbox"/> Single entry одна Single entry <input type="checkbox"/> Two entries две Two entries <input type="checkbox"/> Multiple entries многоразовая Multiple entries		C	
25. Duration of stay ПРОДОЛЖИТЕЛЬНОСТЬ ПРЕБЫВАНИЯ days (каждый день)		D	
26. Other visas (issued during the past three years) and their period of validity ВИЗЫ ПОЛУЧЕННЫЕ ЗА ПОСЛЕДНИЕ 3 ГОДА И СРОК ИХ ДЕЙСТВИЯ		D+C	
27. In the case of transit, have you an entry permit for the final country of destination? <input type="checkbox"/> No <input type="checkbox"/> Yes, valid until Issuing authority:		Number of entries: 1 2 Multiple	
* 28. Previous stays in this or other Schengen states ПРЕДЫДУЩИЕ ПОЕЗДКИ В НОРВЕГИЮ И ДРУГИЕ СТРАНЫ ШЕНГЕНА		Valid from	
		To	
		Valid for	

* The questions marked with * do not have to be answered by family members of EU or EEA citizens (spouse, child or dependent ascendant). Family members of EU or EEA citizens have to present documents to prove this relationship.

29. Purpose of travel <input type="checkbox"/> Tourism <input checked="" type="checkbox"/> БИЗНЕС <input type="checkbox"/> Business <input type="checkbox"/> ВИЗИТ В СЕМЬЮ ИЛИ К ДРУЗЬЯМ Visit to Family or Friends <input type="checkbox"/> КУЛЬТУРА/СПОРТ Cultural/Sports <input type="checkbox"/> Official <input type="checkbox"/> МЕДИЦ. Medical reasons Other (please specify): ЦЕЛЬ ПОЕЗДКИ В ШЕНГЕН (УКРАИНА)		FOR EMBASSY/ CONSULATE USE ONLY
* 30. Date of arrival ДАТА ПРИВЫТИЯ		
* 31. Date of departure ДАТА ВОЗВРАЩЕНИЯ		
* 32. Border of first entry or transit route МЕСТО ПЕРЕСЕЧЕНИЯ ГРАНИЦЫ		
* 33. Means of transport КАКИМ ВИДОМ ТРАНСПОРТА		
* 34. Name of host or company in the Schengen states and contact person in host company. If not applicable, give name of hotel or temporary address in the Schengen states		
Name ФАМИЛИЯ И ИМЯ ПРИГЛАШАЮЩЕГО		Telephone and telefax НОМЕР ТЕЛЕФОНА
Full address ПОЛНЫЙ АДРЕС В НОРВЕГИИ		E-mail address ЭЛЕКТРОННЫЕ АДРЕС@
* 35. Who is paying for your cost of travelling and for your costs of living during your stay? <input type="checkbox"/> Myself <input type="checkbox"/> Host person(s) <input type="checkbox"/> Host company (State who and how and present corresponding documentation) КТО ОПЛАЧИВАЕТ ВАШУ ПОЕЗДКУ		
* 36. Means of support during your stay <input type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input type="checkbox"/> Credit Cards <input type="checkbox"/> Accommodation <input type="checkbox"/> Other <input type="checkbox"/> Travel and/or health insurance. Valid until: КАКИМ ОБРАЗОМ ПОЕЗДКА БУДЕТ ОПЛАЧЕНА		
37. Spouse's family name ФАМИЛИЯ СУПРУГА/И		38. Spouse's family name at birth ФАМИЛИЯ СУПРУГА/И ПРИ РОЖДЕНИИ
39. Spouse's first name ИМЯ СУПРУГА/И	40. Spouse's date of birth ДАТА РОЖДЕНИЯ	41. Spouse's place of birth МЕСТО РОЖДЕНИЯ
42. Children (Application must be submitted separately for each passport)		
Name	First name	Date of birth
1 ФАМИЛИЯ РЕБЕНКА	ИМЯ РЕБЕНКА	ДАТА РОЖДЕНИЯ
2		
3		
43. Personal data of the EU or EEA citizen you depend on. This question should be answered only by family members of EU or EEA citizens. ДАННЫЙ ПУНКТ ЗАПОЛНЯЕТСЯ ЧЛЕНАМИ СЕМЬИ ГРАЖДАН ЕС ИЛИ ЕЭС.		
Name ФАМИЛИЯ		First Name ИМЯ
Date of birth ДАТА РОЖДЕНИЯ	Nationality ГРАЖДАНСТВО	Number of passport НОМЕР ПАСПОРТА
Family relationship СТЕПЕНЬ РОДСТВА С ГРАЖДАНИНОМ ЕС ИЛИ ЕЭС. of an EU or EEA citizen		
44. I am aware of and consent to the following: any personal data concerning me which appear on this visa application form will be supplied to the relevant authorities in the Schengen states and processed by those authorities, if necessary, for the purposes of a decision on my visa application. Such data may be input into, and stored in, databases accessible to the relevant authorities in the various Schengen states. At my express request, the consular authority processing 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 altered or deleted, in particular, should they be inaccurate, in accordance with the national law of the state concerned. 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 Schengen state which deals with the application. I undertake to leave the territory of the Schengen states upon 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 Schengen 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 the Schengen Implementing Convention and am thus refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Schengen states.		
45. Applicant's home address ДОМАШНИЙ АДРЕС		46. Telephone number НОМЕР ТЕЛЕФОНА
47. Place and date МЕСТО И ДАТА ЗАПОЛНЕНИЯ АНКЕТЫ		48. Signature (for minors, signature of custodian/guardian) РОСПИСЬ