

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): IVANOVA			<p style="text-align: center;">FOR OFFICIAL USE ONLY</p> <p>Date of application:</p> <p>Application number:</p> <p>Application lodged at:</p> <p style="margin-left: 20px;">Embassy/consulate Service provider Commercial intermediary Border (Name): Other:</p> <p>File handled by:</p> <p>Supporting documents:</p> <p style="margin-left: 20px;">Travel document Means of subsistence Invitation TMI Means of transport Other:</p> <p>Visa decision:</p> <p style="margin-left: 20px;">Refused Issued: A C LTV</p> <p style="margin-left: 20px;">Valid: From: Until:</p> <p>Number of entries:</p> <p style="margin-left: 20px;">1 2 Multiple</p> <p>Number of days:</p>
2. Surname at birth (Former family name(s)): PETROVA			
3. First name(s) (Given name(s)): OLGA			
4. Date of birth (day-month-year): 12-10-1988	5. Place of birth: MOSCOW	7. Current nationality: Russian (Former USSR)	
	6. Country of birth: Russian Federation	Nationality at birth, if different: [-]	
		Other nationalities: [-]	
8. Sex: [-] Male [x] Female	9. Civil status: [-] Single [x] Married [-] Registered partnership [-] Separated [-] Divorced [-] Widow(er) [-] Other (please specify)		
10. Parental authority (in case of minors) /legal guardian (surname, first name, address, if different from applicant's, telephone no., email address, and nationality):			
11. National identity number, where applicable:			
12. Type of travel document: [x] Ordinary passport [-] Diplomatic passport [-] Service passport [-] Official passport [-] Special passport [-] Other travel document (please specify):			

¹ No logo is required for Norway, Iceland, Liechtenstein and Switzerland.

13. Number of travel document: 721234567	14. Date of issue: 24-01-2020	15. Valid until: 24-01-2030	16. Issued by (country): RUSSIA
17. Personal data of the family member who is an EU, EEA or CH citizen if applicable			
Surname (Family name):		First name(s) (Given name(s)):	
Date of birth (day-month-year):	Nationality:	Number of travel document or ID card:	
18. Family relationship with an EU, EEA or CH citizen if applicable: [-] Spouse [-] Child [-] Grandchild [-] Dependent ascendant [-] Registered partnership [-] Other (please specify):			
19. Applicant's home address and e-mail address: Neftyannikov STR. 8, APT 8 141727 Dolgoprudniy, Moscow region Russian Federation IVANOVA.OLGA@POCHTA.COM		Telephone no.: 007 9181234567	
20. Residence in a country other than the country of current nationality: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
* 21. Current occupation: Manager			
* 22. Employer and employer's address and telephone number. For students, name and address of educational establishment: COMPANY NAME LESNAYA STR., 7, OFFICE 12 125196 MOSCOW 007 4955678910			
23. Purpose(s) of the journey: <input checked="" type="checkbox"/> Tourism [-] Business [-] Visiting family or friends [-] Cultural [-] Sports [-] Official visit [-] Medical reasons [-] Study [-] Airport transit [-] Other (please specify):			
24. Additional information on the purpose of the stay:			
25. Member State of main destination (and other Member States of destination, if applicable): 1. Netherlands	26. Member State of first entry: Netherlands	Duration of the intended stay or transit Indicate number of days: 7	
27. Number of entries requested: <input checked="" type="checkbox"/> Single entry [-] Two entries [-] Multiple entries Intended date of arrival of the first intended stay in the Schengen area: 22-05-2020 Intended date of departure from the Schengen area after the first intended stay: 28-05-2020			

<p>28. Fingerprints collected previously for the purpose of applying for a Schengen visa: [-] No [x] Yes. Date, if known 02.03.2019 Visa sticker number, if known FIN0102030</p>	
<p>29. Entry permit for the final country of destination, where applicable:</p>	
<p>* 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):</p> <p>1. HILTON AMSTERDAM</p>	
<p>Address and e-mail address of inviting person(s)/hotel (s)/temporary accommodation(s):</p> <p>1. Apollolaan 138 1077 BG Amsterdam info.amsterdam@hilton.com</p>	<p>Telephone no.:</p> <p>1. 0031 207106000</p>
<p>* 31. Name and address of inviting company/organisation:</p> <p>1. --</p>	
<p>Surname, first name, address, telephone no., and e-mail address of contact person in company /organisation:</p> <p>1. --</p>	<p>Telephone no. of company/organisation:</p> <p>1. --</p>
<p>* 32. Cost of travelling and living during the applicant's stay is covered:</p>	
<p><input checked="" type="checkbox"/> By the applicant himself/herself</p> <p>Means of support: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input checked="" type="checkbox"/> Credit card <input checked="" type="checkbox"/> Pre-paid accommodation <input type="checkbox"/> Pre-paid transport <input type="checkbox"/> Other (please specify):</p>	<p><input checked="" type="checkbox"/> By a sponsor (host, company, organisation), please specify:</p> <p>Other (please specify): SPOUSE - IVANOV SERGEY</p> <p>Means of support: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accommodation provided <input checked="" type="checkbox"/> All expenses covered during the stay <input type="checkbox"/> Pre-paid transport <input type="checkbox"/> Other (please specify):</p>

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 is: Ministry of Foreign Affairs, Consular Affairs and Visa Policy Department (DCV), Postbus 20061, 2500 EB DEN HAAG.

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 [Autoriteit Persoonsgegevens, Postbus 93374, 2509 AJ DEN HAAG] 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:

Moscow, 28/02/2020

Signature:

(signature of parental authority/legal guardian, if applicable):

Bama Nognucb