

РНОТО

Consular Section of the Embassy of Portugal in Washington Application for Schengen Visa

	This A	pplication Form i	s Free		
1. Suruame(s) (family name(s))	FOR EMBASY/ CONSULATE USE ONY				
2. Surname(s) at birth (earlier family	Date of application:				
3. First Name (given names)				File handled by:	
4. Date of birth (year-month-day)	5.	. ID Number (optional)			
6. Place and country of birth					
7. Current Nationality/ies	8.	. Original Nationality (Supporting Documents:		
9. Sex	16	D. Marital Status	☐ Valid passport ☐ Financial Means		
☐ Male ☐ Female	i	Single ☐ Marrie Divorced ☐ Widow	☐ Invitation ☐ Means of transport ☐ Health Insurance		
11. Father's Name	Father's Name 12. Mother's name				
□ National Passport □ Diplomatic Passport □ Seaman's Passport □ Seaman's Passport Number					
16. Date of issue		17. Valid until			
18. If your reside in a country other th ☐ No ☐ Yes (number and validity)			to return to that country?		
19. Current Ocupation	Visa:				
20. Employer and employer's address a	☐ Refused ☐ Gramted				
21. Main destination	22. Type of visa		23. Visa	Visa Characteristics:	
	☐ Airport transit☐ Transit☐ Short Stay☐ Long Stay		☐ Individual ☐ Collective	□ LTV □ A □ B □ C □ D	
24. Number of entries requested Single Enry T Two entries T Multiple		25. Duration of stay Visa is requested for: days		☐ D + C Number of entries:	
26. Other visas (issued during the past				☐ 1 ☐ 2 ☐ Multiple	
27. In the case of transit, have you an ed No - Z Yes, valid until:	Valid from To				
* 28. Previous stays in this or other Sch	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 Trip					FOR EMASSY/
Tourism Business TVisit to I	CONSULATE USE ONLY				
☐ Medical Reasons ☐ Other (p	lease specify):				
20. Data of aminut		21 Data of			
30. Date of arrival			31. Date of departure		
32. Border of first entry or transit	33. Means	of transpo			
34. Name of host or company in t	he Schengen state	s and contact person	in host cor	nnany. If not applicable give nar	ne l
of hotel or temporary address in the					
Name				Telephone and telefax	
Full address				e.mail address	
* 35. Who is paying for your cost o	C4	Clining	dinc	24.02	
☐ Myself ☐ Host person(s) ☐ Host					
* 36. Means of support during you	rstay				
☐ Cash ☐ Traveller's Cheques ☐ Travel and/or health insurance. Val		Accomodations 🗆 O	ther:	·	
37. Spouse's family name		38. Spous	se's family	name at birth	_
			J		
39. Spouse's first name	40.5	Spouse's date of birth		41. Spouse's place of birth	
42. Children (Applications must be s	ubmitted separately	y for each passport)			
	First Names		Date	of birth	
			•••••		
3					
43. Personal data of the EU or EEA members of EU or EEA citizens.)	citizen on whom	you depend. (This qu	estion sho	ild be answered only by family	
Surname(s)		First N	7		
Date of birth	Nationality			Passport Number	-
Family Relationship:					_
		of an EU or	EEA citiz	en	
44. I am aware of and consent to the t will be supplied to the relevant author	ities in the Schenge	en states and processed	by those a	uthorities, if necessary, for the	
purposes of a decision on my visa app authorities in the various Schengen sta		i may be input into, an	a storea in,	databases accessible to the relevant	
At my express request, the consular at my right to check the personal data co					
accordance with the national law of th	e state concerned.		-		
I declare that to the best of my knowle I am aware that any talse statements w					
and may also render me hable to prose	cution under the la	w of the Schengen sta	te which de	als with the application.	
I undertake to leave the territory of the I have been informed that possession of					
Schengen states. The mere fact the	at a visa has been g ovisions of Article	ranted to me does not 5 1 of the Schengen li	mean that I mplementin	will be entitled to compensation if g Convention and am thus refused	I
45. Applicant's home address				46. Telephone	
47. Place and date	-				
				ignature of custodian /guardian)	