



# Application for Schengen Visa

This application form is free

PHOTO

1. Surname (Family name) (x) <b>DELA CRUZ</b>				FOR OFFICIAL USE ONLY  Date of application:  Visa application number:  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  Name:  <input type="checkbox"/> Other  File handled by:  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:  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 .....  Number of entries: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple  Number of days:					
2. Surname at birth (Former family name(s)) (x)									
3. First name(s) (Given name(s)) (x) <b>JUAN</b>									
4. Date of birth (day-month-year) <b>12-06-1980</b>		5. Place of birth <b>MANILA</b>						7. Current nationality Nationality at birth, if different: <b>FILIPINO</b>	
		6. Country of birth <b>PHILIPPINES</b>							
8. Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		9. Marital status <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other (please specify)							
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian									
11. National identity number, where applicable									
12. Type of travel document <input checked="" type="checkbox"/> Ordinary passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Official passport <input type="checkbox"/> Special passport <input type="checkbox"/> Other travel document (please specify)									
13. Number of travel document <b>EB123456</b>		14. Date of issue <b>08-02-2007</b>						15. Valid until <b>08-02-2012</b>	
		16. Issued by <b>DFA MANILA</b>							
17. Applicant's home address and e-mail address <b>123 RIZAL ST. QUEZON CITY, PHILIPPINES</b> <b>jdacruz@email.com</b>				Telephone number(s) <b>+632-800-1234</b> <b>+63917-123-4567</b>					
18. Residence in a country other than the country of current nationality <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Residence permit or equivalent ..... No. .... Valid until .....									
* 19. Current occupation <b>MARKETING MANAGER</b>									
* 20. Employer and employer's address and telephone number. For students, name and address of educational establishment. <b>ABC COMPANY INC.</b> <b>+632-800-8888</b> <b>123 ROXAS DRIVE</b> <b>MANDALUYONG CITY, PHILIPPINES</b>									
21. Main purpose(s) of the journey: <input type="checkbox"/> Tourism <input checked="" type="checkbox"/> Business <input type="checkbox"/> Visiting family or friends <input type="checkbox"/> Cultural <input type="checkbox"/> Sports <input type="checkbox"/> Official visit. <input type="checkbox"/> Medical reasons <input type="checkbox"/> Study <input type="checkbox"/> Transit <input type="checkbox"/> Airport transit <input type="checkbox"/> Other (please specify)									

