

Application for Schengen Visa This application form is free

РНОТО

				<u> </u>
1. Surname (Family nar	me) (x) CHEN			FOR OFFICIAL USE ONLY
2. Surname at birth (Former family name(s)) (x)				Date of application:
				Visa application number:
3. First name(s) (Given	name(s)) (x) Jing	gwei		1
				Application lodged at Embassy/consulate
4. Date of birth	le procession de la company de			–□ CAC
(day-month-year)	5. Place of birth Shanghai		7.Current nationality Chinese	□ Service provider
			Nationality at birth, if	Commercial intermediaryBorder
27/08/2009	Country of bir	th	different:	
	RP China		Belgian	Name:
8. Sex	9.	Marital status		□ Other
X Male		Single X Married		
□ Female		Separated Divord Other (please spec		File handled by:
			,,	Supporting documents:
10. In the case of mino	rs: Surname, first n	ame, address (if di	fferent from applicant's) and	d □ Travel document □ Means of subsistence
nationality of parental a	autnority/legal guard	ııan		□ Invitation
Chen, Liu, 54321,	Wuyi Road, Sha	ınghai		 Means of transport
		_		□ TMI □ Other:
				U Other.
11. National identity nu	mber, where applica	able		-
12345620090827	71234			Visa decision:
12. Type of travel docu	ment			–□ Refused
X Ordinary passport	mene			□ Issued:
 Diplomatic passport 		Official passport $\ \square$	Special passport	□ A
 Other travel document 13. Number of travel 	t (please specify) 14. Date of issue	15 Valid until	16. Issued by	_ C
document	14. Date of issue	5 15. Valid until	10. Issued by	□ LTV
G12345678	2009-08-27	2014-08-26	Ministry of Foreign	□ Valid:
			Affairs Shanghai	From Until
17. Applicant's home ac	ddress and e-mail ac	ddress	Telephone number(s)	
42245 W D	d Observation			Number of entries:
12345, Wuyi Roa	id, Shanghai			□ 1 □ 2 □ Multiple
<u>chen.jingwei@yahoo.cn</u>				Number of days:
18. Residence in a cour	itry other than the c	country of current r	nationality	_
X No			N/ 19 1 - 19 1	
□ Yes. Residence permi	t or equivalent	No	Valid until	
* 19. Current occupation	on .			_
Marketing manag				

 20. Employer and employer's address and tele address of educational establishment. 	ephone number. For students, name and	
XYZ Co Lt, 54, Humin Road, 203578 Shanghai – telephone 021/1234567	8	
21. Main purpose(s) of the journey:		
□ Tourism X Business □ Visiting family or friends	s 🗆 Cultural 🗆 Sports 🗆 Official visit	<u> </u>
□ Medical reasons	·	<u> </u>
🗆 Study 🗆 Transit 🗆 Airport transit 🗆 Other (plea	se specify)	
22. Member State(s) of destination	23. Member State of first entry	<u> </u>
Belgium	Germany	
24. Number of entries requested	25. Duration of the intended stay or	
	transit	I
,	Indicate number of days	<u> </u>
X Two entries		1
□ Multiple entries	30	

(x) Fields 1-3 shall be filled in in accordance with the data in the travel document.

26. Schengen visas issued during the past three ye	ars	
□ No		
X Yes. Date(s) of validity from to		
Belgium 25 days from 29/07/2008 to	29/10/2008	
France 90 days from 29/04/2007 to		
27. Fingerprints collected previously for the purpose		
X No	o er apprymy for a contingent field	
□ Yes. Date, if known		
28. Entry permit for the final country of destination	, where applicable	
Issued by Valid from	until	
Embassy of Congo in Beijing 01/10/201	10 30/10/2010	
	•	
29. Intended date of arrival in the Schengen area	30. Intended date of departure from the	
	Schengen area	
13/09/2010	23/09/2010	
	23/09/2010	
* 31. Surname and first name of the inviting person	n(s) in the Member State(s).	
If not applicable, name of hotel(s) or temporary acc	commodation(s) in the Member State(s)	
Mr Dupont Alexandre		
Or		
Hôtel Sans Soucis		
Address and a mail address of inviting	Talankana and balafa	
Address and e-mail address of inviting	Telephone and telefax	
person(s)/hotel(s)/temporary accommodation(s)	T6 - 02 /422456	
25 Grand Place 1000 Pruvelles	Tf: 02/123456	
25, Grand Place, 1000 Bruxelles	Fax: 02/654321	
	1	-

^{*} The fields marked with * shall not be filled in by family members of EU, EEA or CH citizens (spouse, child or dependent ascendant) while exercising their right to free movement. Family members of EU, EEA or CH citizens shall present documents to prove this relationship and fill in fields no 34 and 35.

			_	
*32. Name and address of invi	iting company/	organisation	Telephone and telefax of	
			company/organisation	
Boucherie sans os Co	Ltd,			
Rue de l'Abattoir, 23,	3456, Oster	ıde	Tf: 02/2345678	
			Fax: 02/8765432	
Surname, first name, address,	telephone, tel	efax, and e-n	nail address of contact person in	1
company/organisation	•	•	·	
Mr Dupont Alexandre, D	Director Hun	nan resour	ces,	
Rue de l'Abattoir, 32, 6			•	
Tf: 03/2345678, Fax:		l32 alex	andre.dupont@gmail.be	
11 1 00/ 20 10 0/ 0/ 1 u.x.	000,000	<u> </u>		-
\$22 Cook of two valling and livi			v is severed	-
*33. Cost of travelling and living	ng during the a	applicant's sta	y is covered	
V h th 15 15 //	16	- by a spans	or (host company organisation)	-
X by the applicant himself/her	seir		or (host, company, organisation)	•
		please specif	y rred to in field 31 or 32	
			rred to in field 31 or 32 er (please specify)	
			er (please specify)	
Manna of aumnout		Means of sup	port	
Means of support		□ Cash	рогс	
Cash Travellerie sharuse			ation provided	
□ Traveller's cheques X Credit card			es covered during the stay	
		□ Pre-paid tr		
□ Pre-paid accommodation		□ Other (plea		
- Pre-paid transport - Other (places specify)		- other (piec	ise speeny)	
□ Other (please specify)				
		L		+
34. Personal data of the family	, member who	ic an ELL EEA	or CH citizen	†
Surname	member who	First name(s		+
ZHANG		Bibiche)	
Date of birth	Nationality		Number of travel document or II	-
Date of birth	Nationality			1
14/02/1024	Dolois	_	card	
14/02/1934	Belgiar	1	LD123456	
35. Family relationship with an	I FIL FFA or CI	-l citizen	I.	†
Solitarini, relationship with an	. 20, 22A 01 C1	. 51612611		
X spouse				
child				
grandchild				
□ grandenid □ dependent ascendant				
uependent ascendant				
36. Place and date	37 Signat	ure (for mino	rs, signature of parental authority	,
Jo. Place and date	/ legal gua		s, signature or parental authority	
Shanghai 27/09/2000		i didii)		
Shanghai 27/08/2009	7			

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 (cf. field no 24):

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 visa application; and any personal data concerning me which appear on the visa 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 visa 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)¹ 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: FPS Foreign Affairs, Foreign Trade and Development Cooperation *rue des Petits Carmes 15 1000 Brussels Belgium.*

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 State concerned. The national supervisory authority of that Member State (Commission for the Protection of Privacy - 139, rue Haute, 1000 Brussels) 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 5(1) of Regulation (EC) No 562/2006 (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 (for minors, signature of parental authority/legal guardian):
Shanghai	27/08/2009	(101 millors, signature of parental authority/legal guardian).

Insofar as the VIS is operational.