

This application form should be filled out in English  
此表格必须以英文填写

PHOTO  
照片



**Schengen Visa Application form**  
**申根签证申请表**

This application form is free  
此表格免费

1. Surname (Family name) (x) 姓氏 MA				For official use only 签证机关专用  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"/> Multiples  Number of days:	
2. Surname at birth (Former family name (s) (x) 出生时姓氏 XIAO					
3. First name (s) (Given name (s) (x) 名字 XIAO					
4. Date of birth (day-month-year) 出生日期 (日-月-年)  11-04-1988		5. Place of birth / 出生地  SICHUAN 6. Country of birth / 出生国 CHINA		7. Current nationality / 现国籍 CHINESE Nationality at birth, if different: 出生时国籍, 如不同	
8. Sex / 性别 X Male / 男 <input type="checkbox"/> Female / 女		9. Marital status / 婚姻状况 <input type="checkbox"/> Single / 未婚 <input checked="" type="checkbox"/> Married / 已婚 <input type="checkbox"/> Separated / 分居 <input type="checkbox"/> Divorced / 离婚 <input type="checkbox"/> Widow (er) / 丧偶 <input type="checkbox"/> Other / 其它 .....			
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority / legal guardian / 未成年人士须填上合法监护人的姓名、地址(如与申请人不同)、及国籍					
11. National identity number, where applicable 国民身份证号码, 如适用					
12. Type of travel document 护照种类: <input checked="" type="checkbox"/> Ordinary passport / 普通护照 <input type="checkbox"/> Diplomatic passport / 外交护照 <input type="checkbox"/> Service passport / 公务护照 <input type="checkbox"/> Official passport / 官员护照 <input type="checkbox"/> Special passport / 特殊护照 <input type="checkbox"/> Other (please specify) / 其它旅行证件 (请注明): .....					
13. Number of travel document 旅行证件编号 E51586412		14. Date of issue 签发日期 20-05-2015		15. Valid until 有效期至 19-05-2025	
				16. Issued by 签发机关 MPS EXIT&ENTRY ADMINISTRATION	
17. Applicant's home address and e-mail address 申请人地址及电邮 2-1203, HUANGHOU INTERNATIONAL, NO. 66, DATANGKAN STREET, CHENGDU, SICHUAN 23669130@QQ.COM				Telephone number(s) 电话号码 18228092010	
18. Residence in a country other than the country of current nationality 是否居住在现时国籍以外的国家 X No 否 <input type="checkbox"/> Yes. Residence permit or equivalent ..... No ..... Valid until..... 是。 居留证 编号 有效期至					
*19. Current occupation 现职业 MARKETING MANAGER					
*20. Employer and employer's address and telephone number. For students, name and address of educational establishment. 工作单位名称, 地址和电话, 学生填写学校名称及地址 SICHUAN XIANGSHENG SCIENCE AND TECHNOLOGY CO., LTD 1-1002, BUILDING 1, BULUMINGDUN SQUARE, NO. 99, JINHUI EAST 1ST STREET, GAOXIN DISTRICT, CHENGDU, SICHUAN 862883379220					
21. Main purpose(s) of the journey: 旅程主要目的 <input checked="" type="checkbox"/> Tourism / 旅游 <input type="checkbox"/> Business / 商务 <input type="checkbox"/> Visiting Family or Friends / 探亲访友 <input type="checkbox"/> Cultural / 文化 <input type="checkbox"/> Sports / 体育 <input type="checkbox"/> Official visit / 官方访问 <input type="checkbox"/> Medical reasons / 医疗 <input type="checkbox"/> Study / 升学 <input type="checkbox"/> Transit / 过境 <input type="checkbox"/> Airport transit / 机场过境 <input type="checkbox"/> Other (please specify) / 其它 (请注明)					

(x) Fields 1-3 shall be filled in accordance with the data in the travel document  
字段 1-3 须依据旅行证件填上相关资料

22. Member State (s) of destination / 目的地之申根国 FINLAND	23. Member State of first entry / 最先抵达的申根国 FINLAND-HELSINKI	
24. Number of entries requested 申请入境次数 <input type="checkbox"/> Single entry / 一次 <input checked="" type="checkbox"/> Multiple entries / 多次  <input type="checkbox"/> Two entries / 两次	25. Duration of the intended stay or transit Indicate number of days 预计逗留或过境日数 10 DAYS	

The fields marked with \* shall not be filled 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.

欧盟、欧洲经济区或瑞士公民的家庭成员(配偶、子女或赡养的老人)行使其自由往来的权利，不必回答带\*的问题，欧盟、欧洲经济区或瑞士公民的家庭成员必须根据字段 34 及 35 的数据提交证明其亲属关系的文件。

26. Schengen visas issued during the past three years / 过往三年获批的申根签证 <input checked="" type="checkbox"/> No / 没有  <input type="checkbox"/> Yes. Date (s) of validity from ..... to ..... 有。 有效期由 ..... 至 .....		
27. Fingerprints collected previously for the purpose of applying for a Schengen visa 以往申请申根签证有否指纹纪录  <input checked="" type="checkbox"/> No / 没有 <input type="checkbox"/> Yes 有 ..... Date, if known / 日期, 如知道		
28. Entry permit for the final country of destination, where applicable 最后目的地之入境许可  Issued by ..... Valid from ..... until ..... 签发机关 ..... 有效日期由 ..... 至 .....		
29. Intended date of arrival in the Schengen area 预定入境申根国日期 24-06-2015	30. Intended date of departure from the Schengen area 预定离开申根国日期 03-07-2015	
*31. 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 States (s) 申根国的邀请人姓名。如不适用, GIO HOTEL KLUUVI 请填写申根国的酒店或暂住居所名称		
Address and e-mail address of inviting person (s) / hotel (s) / temporary accommodation (s) 邀请人/酒店/暂住居所的地址及电邮  KLUUVIKATE 4, ETELAINEN SUURPIIRI, 00100 HELSINKI, FINLAND		
Telephone and telefax 电话 及 传真 TEL:+358103444400		
*32. Name and address of inviting company / organization 提出邀请的公司或机构名称及地址		
Telephone and telefax of company / organisation 公司或机构的电话及传真		
Surname, first name, address, telephone, telefax, and e-mail address of contact person in company / organisation 该公司/机构的联络人姓名、地址、电话、传真及电邮		
*33. Cost of traveling and living during the applicant's stay is covered 旅费以及在国外停留期间的生活费用		
<input checked="" type="checkbox"/> by the applicant himself/herself / 由申请人支付  Means of support / 支付方式 <input type="checkbox"/> Cash / 现金 <input type="checkbox"/> Traveller's cheques / 旅行支票 <input checked="" type="checkbox"/> Credit card / 信用卡 <input type="checkbox"/> Prepaid accommodation / 预缴住宿 <input type="checkbox"/> Prepaid transport / 预缴交通 <input type="checkbox"/> Other (please specify) / 其它(请注明)		<input type="checkbox"/> by a sponsor (host, company, organisation), please Specify / 由赞助人支付, 请注明 <input type="checkbox"/> referred to in field 31 or 32 / 参照字段 31 及 32 <input type="checkbox"/> other (please specify) / 其它 (请注明)  Means of support / 支付方式 <input type="checkbox"/> Cash / 现金 <input type="checkbox"/> Accommodation provided / 提供住宿 <input type="checkbox"/> All expenses covered during the stay / 支付旅程期间所有开支 <input type="checkbox"/> Prepaid transport / 预缴交通 <input type="checkbox"/> Other (please specify) / 其它(请注明)

34. Personal data of the family member who is an EU, EEA or CH citizen 家庭成员为欧盟、欧洲经济区或瑞士公民，请填上其个人资料			
Surname 姓氏		First name(s) 名字	
Date of birth / 出生日期	Nationality / 国籍	Number of travel document or ID card 旅行证件或身份证编号	
35. Family relationship with an EU, EEA or CH citizen 申请人与欧盟、欧洲经济区或瑞士公民的关系			
<input type="checkbox"/> spouse <input type="checkbox"/> child ..... <input type="checkbox"/> grandchild <input type="checkbox"/> dependent ascendant 配偶                  子女                  孙儿女                  受养人			
36. Place and date / 地区 及 日期		37. Signature (for minors, signature of parental authority/legal guardian) 签署（未成年人由其监护人代签）	

I am aware that the visa fee is not refunded if the visa is refused / 本人知道即使签证被拒也不能退还签证费

Applicable in case a multiple-entry visa is applied for (cf. field No24): / 适用于申请多次入境签证 (参照字段 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.  
本人知道须预备有足够保额的旅游医疗保险作为首次及其后各次出发到申根国家领域之用

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 fulfill 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: **Commission Nationale de l'Informatique et des Libertés – 8, rue Vivienne – 75083 PARIS cedex 02**

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 processing 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 Nationale de l'Informatique et des Libertés – 8, rue Vivienne – 75083 PARIS cedex 02*) will hear claims concerning the protection of personal data.

I declare that to the best of my knowledge all particulars supplied by me are corrected and completed. 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.

我知道并同意以下条款：必须提供本签证申请表上所收集的数据，包括我的照片、以及指纹样本，用作核实我的签证申请。本签证申请表上关于我的任何个人资料，包括我的照片、以及指纹样本，将被提交给有关申根国家的相应机构，以便用于审理我的签证申请。

此数据将会连同有关申请的批核决定以及废除、取消或延长已发签证的决定，一并输入在签证信息系统(VIS)(1)并储存最长五年，其间各签证部门、于各申根国边境及境内执行签证检查的法定部门、各申根国的移民局以及难民部门都有权使用有关数据，作为审查该人士是否符合资格合法进入、逗留、或居住于申根国境，作为识别不符合或不再符合资格的人士，以及作为审查难民申请和决定负责机关谁属。于某些情况下，该数据将被开放予各申根国的特定部门以及欧盟警察组织，作为预防、侦查和研究恐怖袭击及其它严重罪案。负责处理数据的申根国部门是：法国国家信息和自主权委员会– **8, rue Vivienne – 75083 PARIS cedex 02**。

当我的数据被错误更改以及该数据被不合法地删除，我知道自己有权向输入本人数据至签证信息系统、传输有关我的数据、或要求取得有关我的资料的申根国取得通知。如我明确请求，对我的申请进行审理的使领馆会通知我，以何种方式可以行使核查有关我的个人资料并依据有关国家法律规定更改或删除错误数据、以及取得赔偿的权利。该申根国的国家监督部门(法国国家信息和自主权委员会– *8, rue Vivienne – 75083 PARIS cedex 02*)将会听取保障个人资料的要求。

我声明，就我所知，我提供的一切数据都是正确和完整的。我知道，任何虚假陈述都将导致拒绝签证或已发签证的废止，也可以根据对我的申请进行审理的申根国的法律规定进行刑事追究。

如果签证申请被批准，我保证在签证到期前离开申根国家领土。我获悉，拥有签证只是进入欧洲申根国家领土其中的一个条件，如果没有履行欧洲共同体公约562/2006之第五条第一款规定的条件而被拒绝入境，那么仅仅拥有签证并不意味着我有权就此要求赔偿。在进入欧洲申根国家的领土时，入境条件将被再次审查。

Place and date / 地区 及 日期	Signature (for minors, signature of parental authority/legal guardian) 签署（未成年人由其监护人代签）
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(1) In so far as the VIS is operational