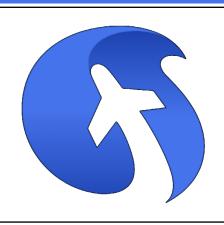
تم تحميل هذا الملف من موقع مهاجرون





نموذج طلب تأشيرة شنغن

موقع مهاجرون ← السويد ← التأشيرات

روابط مواقع التواصل الاجتماعي في السويد











أحدث ما تم نشره في السويد	
التجنيد الإجباري في السويد: الوثائق والإجراءات والرأي العام مع الكُتيب الرسمي	1
شرط الاعالة حسب القانون الجديد في السويد	2
طرق ايجاد عمل في السويد بدون لغة سويدية	3
شروط الحصول على الجنسية السويدية للأطفال المولودين في السويد	4
التعليم الابتدائي والثانوي والعالي في السويد	5
للمزيد من المقالات التي تهم المهاجرين في السويد اضغط هنا	

Harmonised application form



Application for Schengen Visa

This application form is free

Family members of EU, EEA or CH citizens or of UK nationals who are Withdrawal Agreement beneficiaries 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) FOR OFFICIAL USE ONLY 2. Surname at birth (Former family name(s)) Date of application: 3. First name(s) (Given name(s)) Application number: 4. Date of birth 5. Place of birth 7. Current nationality Application lodged at: (DD-MM-YYYY) ☐ Embassy/consulate 6. Country of birth Nationality at birth, if different ☐ Service provider ☐ Commercial intermediary ☐ Border (Name): Other nationalities 8. Sex Other: 9. Civil status Married Registered Partnership ☐ Male Single ☐ Female Divorced ☐ Widow(er) File handled by: Separated Other Other (please specify) 10. Parental authority (in case of minors) /legal guardian (surname, first name, address, if different from Supporting documents: applicant's, telephone no., email address, and nationality) ☐ Travel document ☐ Means of subsistence ☐ Invitation □ TMI 11. National identity number, where applicable ☐ Means of transport Other: 12. Type of travel document Ordinary passport Diplomatic passport Service passport Official passport □ Special passport □ Other travel document (please specify) Visa decision: 13. Number of travel document 14. Date of issue 15. Valid until 16. Issued by (country) Refused ☐ Issued: 17. Personal data of the family member who is an EU, EEA or CH citizen or an UK national who is a \square A beneficiary of the EU-UK Withdrawal Agreement, if applicable \Box C Surname (Family name) First name(s) (Given name(s)) □ LTV Date of birth (DD-MM-YYYY) Nationality Number of travel document or ID card Valid: From: 18. Family relationship with an EU, EEA or CH citizen or an UK national who is a beneficiary of the Until: EU-UK Withdrawal Agreement, if applicable Grandchild Dependent ascendant Registered Partnership Other (please specify) Number of entries: 19. Applicant's home address and email address Telephone no. □ 2 ☐ Multiple Number of days: 20. Residence in a country other than the country of current nationality □No Yes Residence permit or equivalent No. Valid until 21. Current occupation

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: The Swedish Migration Agency, 601 70 Norrköping, Sweden, www.migrationsverket.se.

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 (contact details: Swedish Authority for Privacy Protection, Box 8114, 104 20 Stockholm, Sweden, www.imv.se) 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	Signature of applicant: (signature of parental authority/legal guardian, if applicable)