

Harmonised application form / 统一申请表 Application for Schengen Visa / 申根签证申请 This application form is free / 此表格免费提供

Family members of EU, EEA or CH citizens or of UK nationals who are beneficiaries of the EU-UK Withdrawal Agreement shall not fill in fields no.21, 22, 30, 31 and 32 (marked with*). 欧盟、欧洲经济区、瑞士公民或退欧协议受益人的英国公民的家庭成员,不得填写第 21、22、30、31 和 32 项(标有*的部分)

Fields 1-3 shall be filled in in accordance with the data in the travel document. / 第 1-3 项须依据旅行证件填写相关资料.

1. Surname (Family name) / 姓:					
2. Surname at birth (Former family name(s)) / 出生时姓氏:					-
					РНОТО
3. First name(s) (Given name(s)) / 名:					照片
4. Date of birth (day-month-year) 出生日期 (日-月-年):	5. Place of birth / 出生	主地:	7. Current nationality	/ 现国籍:	
	6. Country of birth / b	出生国:	Nationality at birth, i 出生时国籍,如与明		
			Other nationalities / 5	其他国籍:	FOR OFFICIAL USE ONLY
8. Sex / 性别:	9. Civil status / 婚姻》	犬况:	□ Single / 未婚	□ Married / 已婚	签证机关专用
□ Male /男 □ Female /女	□ Registered Partnership / 注册伴侣关系 □ Separated / 分居 □ Divorced / 离婚				Date of application:
□ Other /其他	□ Widow(er) / 丧偶	□ Widow(er) / 丧偶			
	□ Other (please specify) / 其它(请注明):			Application number:	
10. Parental authority (in case of minors no., e-mail address, and nationality) / 亲 码、电子邮件及国籍:	Application lodged at:				
时、七丁叫什么固相.	 Embassy/consulate Service provider Commercial 				
11. National identity number, where applicable /公民身份证号码,如适用:					intermediary □ Border (Name):
12. Type of travel document / 旅行证件	– 🗆 Other:				
□ Ordinary passport/普通护照 □ Dipl □ Special passport/特殊护照 □ Oth	File handled by:				
13. Number of travel 14. Da	ate of issue	15.Valid unti	1 16 Issu	ed by (country) 签发	Supporting documents:
document/ 旅行证件编号: 签发日		有效期至:	(国):		□ Travel document □ Means of subsistence
17. Personal data of the family member Withdrawal Agreement, if applicable /如 该家庭成员的个人信息:					 Invitation TMI Means of transport Other:
Surname (Family name) /姓: First name(s) (Given name(s)) /名:			name(s)) /名:	-	
					Visa decision :
Date of birth (day-month-year) Nationality / 国籍: /出生日期(日-月-年):			Number of travel document or ID card /旅行证件或身份证编号:		□ Refused □ Issued:
18. Family relationship with an EU, EEA or CH citizen or a UK national who is a beneficiary of the EU-UK Withdrawal Agreement, if applicable /申请人与欧盟、欧洲经济区、瑞士或受益于退欧协议的英国公民的关系,如适用:					□ A □ C □ LTV
□ spouse /配偶 □ child / 子女 □ Registered Partnership /注册伴侣	□ grandchild /孙儿女 □ other /其他:	□ dependent as	scendant /受养人		

19. Applicant's home address and email address /申请人住址及电子邮件			Telephone no. 电话号码:	D Valid: From: Until:	
20. Residence in a country other th	Number of entries: □ 1 □ 2 □ Multiples				
□No/否					
□ Yes. Residence permit or equiva 是。 居住许可或同等证	Number of Days:				
*21. Current occupation/ 当前职业	<u>/:</u>				
* 22. Employer and employer's add 单位名称,地址和电话,学生填		. For students, name	e and address o	of educational establishment	/工作
23. Purpose(s) of the journey/旅程	主要目的:				
□ Tourism /旅游	□ Business /商务	□ Visiting F	amily or Frier	nds/探亲访友	
□ Cultural /文化	□ Sports /体育	□ Official vi	sit /官方访问		
□ Medical reasons /医疗	□ Study /学习	□ Airport tra	unsit / 机场过:	· 傍	
□ Other (please specify) / 其它 (请	 [注明]	•			
24. Additional information on purp	pose of stay / 有关停留原因	目的补充信息:			
	,				
25. Member State of main destinat	ion (and other	26. Member State	of first entry /	首入由根国·	
Member States of destination, if ar 的地 (以及其他申根目的地, 女	oplicable) /主要申根目	20. Member State	or mist entry /		
27. Number of entries requested / E	申请入境次数:				
□ Single entry / 单次 □ Two er	ntries / 两次 🛛 Multiple	entries / 多次			
Intended date of arrival of the first intended stay in the Schengen area: 在申根地区预计首次停留的预计抵达日期:					
Intended date of departure from the 在申根地区预计首次停留之后的		est intended stay:			
28. Fingerprints collected previous	sly for the purpose of applyi	ng for a Schengen v	isa/以往申请	申根签证是否有指纹纪录:	
□ No /否 □ Yes/ 是.					
Date, if known/如有,请写明日期	月				
Number of the visa, if known /如不	有,请写明签证号码				
29. Entry permit for the final count	try of destination, where app	plicable / 最后目的:	地之入境许可	Í:	
Issued by / 签发机关until / 至until / 至					
* 30. Surname and first name of the accommodation(s) in the Member					
Address and email address of invit accommodation(s) / 邀请人/酒店/			Telephone r	no. / 电话号码:	

31. Name and address of inviting company/organisation / 邀请公司或机构的名	称及地址:	
Surname, first name, address, telephone no., and email address of contact person in company/organisation /邀请公司或机构的联系人姓名、地址、电话号码及电子邮件:	Telephone no. of company/organisation /邀请 公司或机构的电话号码:	
*32. Cost of travelling and living during the applicant's stay is covered /申请人的	旅费以及在国外停留期间的生活费用:	
 □ by the applicant / 由申请人支付 Means of support / 支付方式 □ Cash / 现金 □ Traveller's cheques / 旅行支票 □ Credit card / 信用卡 □ Prepaid accommodation / 预缴住宿 □ Prepaid transport / 预缴交通 □ Other (please specify) / 其它(请注明) 	 □ by a sponsor (host, company, organisation), please specify / 由赞助方(邀请人、公司或机构)支付,请注明: □ referred to in field 30 or 31/参见第 30 及 31 项 □ other (please specify) /其它(请注明) Means of support / 支付方式 □ Cash / 现金 □ Accommodation provided / 提供住宿 □ All expenses covered during the stay / 支付 旅程期间所有开支 □ Prepaid transport / 预缴交通 □ Other (please specify) /其它(请注明) 	
33. Surname and first name of the person filling in the application form, if differen 填表人不是申请人本人):	 nt from the applicant/填表人的姓名(仅适用于	
Address and email address of the person filling in the application form/填表人的地址和电子邮箱	Telephone No/电话:	
I am aware that the visa fee is not refunded if the visa is refused. /本人悉知如果名	Ⅰ 瓷证被拒不能退还签证费。	
Applicable in case a multiple-entry visa is issued: /适用于多次入境签证: I am aware of the need to have adequate travel medical insurance for my first stay 为我的首次停留和以后在申根国领域内的任何访问购买足够的旅行医疗保险		ber States. /本人悉知需要
I am aware of and consent to the following: the collection of the data required by taking of fingerprints, are mandatory for the examination of the application; and a as my fingerprints and my photograph will be supplied to the relevant authorities decision on my application.本人知悉并同意以下条款:该申请表中所有关于本在该申请表中所填写的所有个人信息、指纹样本和照片均可提供给申根国家	ny personal data concerning me which appear on to of the Member States and processed by those auth x人的个人信息、照片或采集的指纹样本均为审	the application form, as well orities, for the purposes of a 百核本人的签证所需。本人
Such data as well as data concerning the decision taken on my application or a dec stored in the Visa Information System (VIS) for a maximum period of five years competent for carrying out checks on visas at external borders and within the Me purposes of verifying whether the conditions for the legal entry into, stay and resid who do not or who no longer fulfil these conditions, of examining an asylum app conditions the data will be also available to designated authorities of the Men investigation of terrorist offences and of other serious criminal offences. 该信息以 统(VIS系统)并最长保存五年,在此期间,所有申根成员国的相关签证部 统,核查签证申请人是否已满足入申根国境并在境内停留的相应前提条件; 定该审核的责任。必要时,各申根成员国的特定部门以及欧盟刑警组织均有	s, during which it will be accessible to the visa at mber States, immigration and asylum authorities i dence on the territory of the Member States are ful lication and of determining responsibility for such aber States and to Europol for the purpose of th 人及签证结果甚或签证注销、撤消或延期的决定 们、边境及境内的签证检查部门以及移民局利 核实不满足或不再满足该前提条件的签证申请	thorities and the authorities in the Member States for the filled, of identifying persons examination. Under certain e prevention, detection and E将一并收录到签证信息系 印难民局均有权登入VIS系 f人: 审审核难民申请并确
The authority of the Member State responsible for processing the data is: /负责管	理该类信息的部门是:	
Ministère des Affaires étrangères et européennes, de la Défense,		

de la Coopération et du Commerce extérieur Bureau des Passeports, visas et légalisations 卢森堡外交和欧洲事务、国防、合作和对外贸易部 护照、签证与认证办公室 6 rue de l'Ancien Athénée L-1144 Luxembourg service.visas@mae.etat.lu

Contact details of the data protection officer/数据保护官联系方式: <u>dataprotection.mae@mae.etat.lu</u>

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. 本人知悉本人有权要求任何一个申根成员国告知VIS系统中都收录了本人哪些个人信息,是由哪个申根成员国收录进去的。除此之外,本人亦有权申请更正系统中收录的错误信息并删除不合法信息。审核本人签证申请的领事机构会应本人要求提供相关说明性信息,如签证申请人应如何行使审核个人信息的权力,依据相关申根成员国的法律规定,要求更正甚或删除不正确的个人信息的权力。

The national supervisory authority of the Grand Duchy of Luxembourg will hear claims concerning the protection of personal data: / 卢森堡大公国的国家监管 机构将受理有关个人数据保护的申诉:

Commission Nationale pour la Protection des données /国家数据保护委员会 15 Boulevard du Jazz, L-4370 Belvaux <u>https://cnpd.public.lu/en/support/contact.html</u> <u>https://cnpd.public.lu/en.html</u>

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. 本人声明以上信息均系本人如实提供,信息正确而完整。本人知悉提供虚假信息可导致本人签证申请被拒签或已得到的签证被注销甚或受理本人签证的申根国会因此而对本人追究刑事责任。

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. 如本人的签证申请被批准,本人有义务在签证到期前离开申根国境。本人亦获悉得到签证仅是具备了进入申根国境的前提条件之一,如果本人因未满足编号为(EU) No 2016/399 的《申根边境法》中第6条第1款中所述前提条件而被拒绝入境,获得签证并不意味着本人有权要求赔偿。在进入申根成员国的领土时,入境条件将被再次审核。

Place and date/地区及日期:	Signature/签字:
	(Signature of parental authority/legal guardian, if applicable):
	(未成年人由其监护人代签,如适用):