



Harmonised application form  
统一申请表格

APPLICATION FOR SCHENGEN VISA  
申根签证申请表

This application form is free  
此表格免费

Photo

Family members of EU, EEA or CH citizens shall not fill in fields no. 21, 22, 30, 31 and 32 (marked with \*).

欧盟、欧洲经济区或瑞士联邦公民家属不填写第 21.22.30.31 及 32 项 (\*标注)

Fields 1 – 3 shall be filled in in accordance with the data in the travel document.

第 1-3 项须按照旅行证件信息填写。

1. Surname (Family name): 姓氏:				<b>ISKLUČIVO ZA SLUŽBENU UPORABU</b> Datum podnošenja zahtjeva:  Broj zahtjeva:  Mjesto podnošenja zahtjeva: <input type="checkbox"/> Veleposlanstvo <input type="checkbox"/> Pružatelj usluga <input type="checkbox"/> Komercijalni posrednik <input type="checkbox"/> Granica (naziv):  <input type="checkbox"/> Drugo  Zahtjev obradio/obradila:  Popratne isprave: <input type="checkbox"/> Putna isprava <input type="checkbox"/> Sredstva za uzdržavanje <input type="checkbox"/> Pozivnica <input type="checkbox"/> Putno zdravstveno osiguranje <input type="checkbox"/> Prijevozna sredstva <input type="checkbox"/> Drugo  Odluka o vizi: <input type="checkbox"/> Odbijena <input type="checkbox"/> Izdana <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> Ograničeno područje valjanosti							
2. Surname at birth (Former family name(s)): 出生时姓氏:											
3. First name(s) (Given name(s)): 名字:											
4. Date of birth (day-month-year): (出生日期(日-月-年):		5. Place of birth: 出生地点:						7. Current nationality: 现国籍:  Nationality at birth, if different: 出生时国籍, 如不同:  Other nationalities: 其他国籍:			
8. Sex: 性别: <input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女		9. Civil status: 公民状况: <input type="checkbox"/> Single 单身 <input type="checkbox"/> Married 已婚 <input type="checkbox"/> Registered partnership 注册伴侣关系 <input type="checkbox"/> Separated 分居 <input type="checkbox"/> Divorced 离异 <input type="checkbox"/> Widow(er) 丧偶 <input type="checkbox"/> Other (please specify): 其他 (请注明):									
10. Parental authority (in case of minors) /legal guardian (surname, first name, address, if different from applicant's, telephone no., e-mail address, and nationality): 父母 (如是未成年申请人) / 合法监护人 (姓, 名, 住址, 如与申请人不同) 电话号码、电子邮件及国籍:											
11. National identity number (where applicable): 公民身份证号码, 如适用:											
12. Type of travel document: 旅行证件类型: <input 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 因公护照 <input type="checkbox"/> Special passport 特殊护照 <input type="checkbox"/> Other travel document (please specify): 其他旅行证件/ 因公护照 (请注明):											
13. Number of travel document: 旅行证件号码:		14. Date of issue: 签发日期:						15. Valid until: 有效期至:		16. Issued by (country): 签发机关 (国家):	
17. Personal data of the family member who is an EU, EEA or CH citizen if applicable: 如有家庭成员为欧盟、欧洲经济区或瑞士联邦公民的, 请填写该家庭成员的个人信息:											
Surname (Family name): 姓氏:		First name(s) (Given name(s)): 名字:									

<b>Date of birth (day-month-year):</b> 出生日期 (日-月-年):	<b>Nationality:</b> 国籍:	<b>Number of travel document or ID card:</b> 旅行证件或个人身份证件号码:	<input type="checkbox"/> Vrijedi: Od: ..... Do: .....  Broj ulazaka <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Više Broj dana
<b>18. Family relationship with an EU, EEA or CH citizen if applicable:</b> 申请人与欧盟, 欧洲经济区或瑞士联邦公民亲属关系, 如涉及:  <input type="checkbox"/> spouse 配偶 <input type="checkbox"/> child 子女 <input type="checkbox"/> grandchild 孙子女 <input type="checkbox"/> dependent ascendant 赡养的老人 <input type="checkbox"/> registered partnership 注册伴侣关系  <input type="checkbox"/> other: 其他: _____			
<b>19. Applicant's home address and e-mail address:</b> 申请人家庭住址及电子邮件地址:	<b>Telephone no.:</b> 电话号码		
<b>20. Residence in a country other than the country of current nationality</b> 在现国籍以外国家居住: <input type="checkbox"/> No 否  <input type="checkbox"/> Yes 否 Residence permit or equivalent: 居留许可或同等证件..... No 号码..... Valid until: 有效期至.....			
<b>*21. Current occupation:</b> 现职业:			
<b>*22. Employer and employer's address and telephone number. For students, name and address of educational establishment:</b> 工作单位的名称, 地址和电话号码。如是学生, 请填写教育机构名称及地址:			
<b>23. Purpose(s) of the journey:</b> 旅行目的:  <input 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 官方出访 <input type="checkbox"/> Medical reasons 医疗 <input type="checkbox"/> Study 学习 <input type="checkbox"/> Airport transit 机场过境  <input type="checkbox"/> Other (please specify): 其他/(请注明): _____			
<b>24. Additional information on purpose of stay:</b> 关于逗留目的的补充信息:			
<b>25. Member State of main destination (and other Member States of destination, if applicable):</b> 主要目的地申根成员国 (及其它目的地申根成员国, 如适用):	<b>26. Member State of first entry:</b> 首入申根成员国:		
<b>27. Number of entries requested:</b> 申请入境次数:  <input type="checkbox"/> Single entry 单次 <input type="checkbox"/> Two entries 两次 <input type="checkbox"/> Multiple entries 多次			
<b>Intended date of arrival of the first intended stay in the Schengen area:</b> 在申根地区预计首次停留的预计抵达日期:	<b>Intended date of departure from the Schengen area after the first intended stay:</b> 在申根地区预计首次停留之后的 预计离开日期:		
<b>28. Fingerprints collected previously for the purpose of applying for a Schengen visa:</b> 此前申请申根签证时是否有指纹记录:			

<input type="checkbox"/> No 否  <input type="checkbox"/> Yes. 是 Date, if known 日期 (如知晓) : ..... Visa sticker number, if known) 签证贴纸号码 (如知晓) : .....		
29. Entry permit for the final country of destination, where applicable: 最终目的地国入境许可 (如适用) : Issued by: 签发机关:                      Valid from: 有效期自:                      Until:至:		
*30. 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 State(s): 申根成员国邀请人姓氏及名字。如不适用, 请填写在申根成员国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/暂住居所地址及电子邮件地址:		Telephone no.: 电话号码:
31. Name and address of inviting company/organisation: 邀请公司/机构名称及地址:		
Surname, first name, address, telephone no., and e-mail address of contact person in company/organisation: 邀请公司/机构, 的联系人姓氏, 名字, 地址, 电话号码及 电子邮件地址		Telephone no. of company/organisation: 邀请公司/机构的联系电话:
*32. Cost of travelling and living during the applicant's stay is covered: 申请人旅费以及停留期间的生活费用由:		
<input type="checkbox"/> by the applicant himself/herself 申请人自己承担  Means of support: 支付方式: <input type="checkbox"/> Cash 现金 <input type="checkbox"/> Traveller's cheques 旅行支票 <input type="checkbox"/> Credit card 信用卡 <input type="checkbox"/> Pre-paid accommodation 预付住宿 <input type="checkbox"/> Pre-paid transport 预付交通 <input type="checkbox"/> Other (please specify): 其他 (请注明):		<input type="checkbox"/> By a sponsor (host, company, organisation), please specify: 由赞助人 (邀请人, 公司, 组织) 承担, 请注明: <input type="checkbox"/> referred to in field 30 or 31 参见第 30 及 31 项 <input type="checkbox"/> other (please specify): 其他 (请注明) : <hr/> Means of support:: 支付方式: <input type="checkbox"/> Cash 现金 <input type="checkbox"/> Accommodation provided 预付住宿 <input type="checkbox"/> All expenses covered during the stay 支付旅行期全部费用 <input type="checkbox"/> Pre-paid transport 预付交通 <input type="checkbox"/> Other (please specify): 其他(请注明) :

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: 适应于多次入境签证申请:  
 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行医疗保险作为首次居留及其后各次出发到申根国家领土访问旅行之用

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 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. 本人知悉并同意以下条款: 该申请表中所有关于本人的个人信息、照片或采集的指纹样本均为审核本人的签证申请所需。本人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的相关主管部门, 以便其受理本人的签证申请并对申请作出决定。

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 Ministry of Foreign and European Affairs of the Republic of Croatia (contact details: Trg N.Š. Zrinskog 7-8, 10000 Zagreb, Hrvatska/Croatia, tel.: 00385 (0)1 4569 964, web: <https://mvep.gov.hr/>). 该信息以及签证结果甚或签证注销、撤消或延期的决定将一并收录到签证信息系统 (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门、边境及境内的签证检查部门以及移民局和难民局均有权登入 VIS 系统, 核查签证申请人是否已满足入申根国境并在境内逗留的相应前提条件; 核实不满足或不再满足该前提条件的签证申请人; 审核难民申请并确定出该申请的主管部门。必要时, 各申根成员国的特定部门以及欧盟刑警组织均有权参考该信息, 用于预防、侦察和调查恐怖活动及其它严重犯罪行为。负责处理这些数据的申根成员国主管机构为: 克罗地亚共和国外交和欧洲事务部(详细联系信息: Trg N.Š. Zrinskog 7-8, 10000 Zagreb, Hrvatska/Croatia, 电话: 00385 (0)1 4569 964, 网址: <https://mvep.gov.hr/>).

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: Croatian Personal Data Protection Agency, address: Selska cesta 136, 10 000 Zagreb, Hrvatska/Croatia, tel.: 00385 1 4609-000, fax: 00385 1 4609-099, email address: [azop@azop.hr](mailto:azop@azop.hr), web: [www.azop.hr](http://www.azop.hr)) will hear claims concerning the protection of personal data. 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。相关申根成员国的国家监督部门 [详细联系信息: 克罗地亚个人信息保护局, 地址: Selska cesta 136, 10 000 Zagreb, Hrvatska/Croatia, 电话.: 00385 1 4609-000, 传真: 00385 1 4609-099, 电子邮箱: [azop@azop.hr](mailto:azop@azop.hr), web: [www.azop.hr](http://www.azop.hr)] 将审理有关保护个人资料信息的申诉。

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. 本人确保以上信息均系本人如实提供, 确保信息正确而完整。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, 甚或受理本人签证申请的申根成员国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. 如本人的签证被批准签发, 本人保证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成员国国家欧洲领土的前提条件之一, 如果本人 仅有了签证却未满足(EU) No. 2016/399 的《申根边境法》中第 6 条第 1 款规定中所述前提条件而被拒绝入境, 本人不得要求赔偿。在进入申根成员国的欧洲领土时, 入境条件将被再次审核。

Place and date: 地点及日期:	Signature: 签名:  (signature of parental authority/legal guardian, if applicable): (未成年人父母/法定监护人签字, 如适用):
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