



Photo

APPLICATION FOR LONG-TERM VISA (VISA D)

This application form is free

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

1. Surname(s) / Family name(s):				Isključivo za službenu uporabu	
2. Surname (s) at birth (former family name(s))					
3. First name(s):					
4. Date of birth (day-month-year)		5. Place of birth	7. Current nationality:		Datum podnošenja zahtjeva:
		6. Country of birth	Nationality at birth, if different:		
				Other nationalities:	
8. Sex	9. Marital status:			Broj zahtjeva u HVIS-u:	
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Lifetime partnership <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(ed) <input type="checkbox"/> Other (please specify):				
10. If the application is lodged by a legal guardian: surname(s), name(s), address (if different from applicant's), phone number, e-mail address and nationality of a legal guardian:					Zahtjev podnesen u: <input type="checkbox"/> DM/KU <input type="checkbox"/> Pružatelj usluga
11. National identity number (where applicable):					
12. Type of travel document: <input type="checkbox"/> Ordinary passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Special passport <input type="checkbox"/> Other travel document (please specify):					Zahtjev obradio/obradila:
13. Number of travel document:	14. Date of issue:	15. Valid until:	16. Issued by (country):		
17. Applicant's home address, e-mail address:			Telephone number:		Priložena dokumentacija: <input type="checkbox"/> Putna isprava <input type="checkbox"/> Poziv <input type="checkbox"/> Prijevozno sredstvo <input type="checkbox"/> Putno zdravstveno osiguranje <input type="checkbox"/> Ostalo
18. Residence in a country other than the country of current nationality <input type="checkbox"/> No <input type="checkbox"/> Yes. Residence permit or equivalent: number: valid until:					
19. Current occupation:					Odluka o vizi: <input type="checkbox"/> Odbijena <input type="checkbox"/> Izdana od do Broj ulazaka <input type="checkbox"/> Jedan <input type="checkbox"/> Više
20. Employer and employer's address and telephone number. For students, name and address of educational establishment (*):					
					Broj odobrenih dana boravka: _____

<p>21. Approval of temporary stay / stay and work permit</p> <p>Approval number: _____</p> <p>Issued by: _____ (please specify police authority that issued the approval)</p> <p>Validity from: _____ until: _____</p>													
<p>22. Temporary stay granted <u>for the purpose of</u>::</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> family reunification</td> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> work</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> secondary school education</td> <td style="padding: 2px;"><input type="checkbox"/> secondment</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> study</td> <td style="padding: 2px;"><input type="checkbox"/> stay of another EEA Member State's long-term resident</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> research</td> <td style="padding: 2px;"><input type="checkbox"/> stay of digital nomads</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> for humanitarian reason</td> <td style="padding: 2px;"><input type="checkbox"/> other purposes</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> lifetime partnership</td> <td></td> </tr> </table>		<input type="checkbox"/> family reunification	<input type="checkbox"/> work	<input type="checkbox"/> secondary school education	<input type="checkbox"/> secondment	<input type="checkbox"/> study	<input type="checkbox"/> stay of another EEA Member State's long-term resident	<input type="checkbox"/> research	<input type="checkbox"/> stay of digital nomads	<input type="checkbox"/> for humanitarian reason	<input type="checkbox"/> other purposes	<input type="checkbox"/> lifetime partnership	
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<p>23. Additional information on purpose of travel:</p> 													
<p>24. Number of entry requested:</p> <p><input type="checkbox"/> Single entry <input type="checkbox"/> Multiple entries</p>													
<p>25. Intended date of arrival</p>	<p>26. Border crossing of first entry:</p>												
<p>27. Fingerprints collected previously for the purpose of visa application</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Date (if known): _____ Visa sticker number (if known): _____</p>													
<p>28. In case of family reunification, please specify family relationship with member in the Republic of Croatia:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; padding: 2px;"><input type="checkbox"/> Spouse</td> <td style="width: 33%; padding: 2px;"><input type="checkbox"/> Informal partner</td> <td style="width: 33%; padding: 2px;"><input type="checkbox"/> Lifetime partner</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> Child (minor)</td> <td colspan="2" style="padding: 2px;"><input type="checkbox"/> Other relative (please specify):</td> </tr> </table>		<input type="checkbox"/> Spouse	<input type="checkbox"/> Informal partner	<input type="checkbox"/> Lifetime partner	<input type="checkbox"/> Child (minor)	<input type="checkbox"/> Other relative (please specify):							
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<p>Surname(s) / Family name(s): :</p>	<p>First name(s):</p>												
<p>Date of birth:</p>	<p>Nationality:</p>												
<p>If family member is not Croatian national, please specify type of permit to stay:</p> 													
<p>Family member's home address, telephone number, e-mail address</p> 													
<p>29. Employer /educational institution name, address, telephone number, e-mail address:</p> 													

30. Address of the intended accommodation(s) in the Republic of Croatia:	
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I am aware that the visa fee is not refunded if the visa is refused.
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<p>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 Republic of Croatia and processed by those authorities, for the purposes of a decision on my visa application.</p> <p>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 of the Republic of Croatia (HVIS) for a maximum period of five years. During that time all data will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Republic of Croatia, immigration and asylum authorities in the Republic of Croatia for the purposes of verifying whether the conditions for the legal entry into, stay, and residence on the territory of the Republic of Croatia 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 also be available to designated authorities of the Republic of Croatia and to Europol for the purpose of prevention, detection and investigation of terrorist offences and other serious criminal offences. The authority responsible for processing the data is the Ministry for Foreign and European Affairs of the Republic of Croatia.</p> <p>I am aware that I have the right to obtain notification of the data relating to me recorded in the HVIS 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, correct or delete if inaccurate or illegally processed, any personal data concerning me in HVIS, as well as of the legal remedies according to the law. Claims concerning personal data protection are dealt by the Croatian Personal Data Protection Agency (address: Selska cesta 136, 10 000 Zagreb, Croatia, telephone: 00385 1 4609-000, telefax; 00385 1 4609-099, email address: azpo@azop.hr).</p> <p>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 Republic of Croatia.</p> <p>I have been informed that possession of a visa is only one of the prerequisites for entry into the Republic of Croatia. 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 the Aliens Act of the Republic of Croatia (Croatian Official Gazette, No. 133/20) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the territory of the Republic of Croatia.</p>
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Place and Date	Signature (for minors and persons deprived of legal capacity, signature of a legal guardian)
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