Harmonised application form

PHOTO



PER THE SPECIFICATION

Application for Schengen Visa

This application form is free FOR OFFICIAL USE ONLY Surname (Family name) (x) KUMAR 2. Surname at birth (Former family name(s)) (x) Date of applicat sa application number: 3. First name(s) (Given name(s)) (x) SHANTHA Application lodged at Current nationality □ Embassy/consulate 4. Date of birth (day-month-year) 5. Place of birth INDIA □ CAC BANGALORE □ Service provider 23/06/1980 Nationality at birth, if different: Country of birth □ Commercial ntermediary 9. Marital status □ Border Male □ Female ♠ Single □ Married □ Separated □ Divorced □ Widow(er)

Other (please specify) Name: 10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian □ Other NA File handled 11. National identity number, where applicable Supporting documents: NA □ Travel document ☐ Means of subsistence 12. Type of travel document Ordinary passport

Diplomatic passport

Service passport

Official passport

Special passport □ Means of transport Other travel document (please specify) □ TMI 14. Date of issue Other: 13. Number of travel 15. Valid until 16. Issued by document RP0 MENTION PASSPORT 23/01/2029 2/1/2013 BANGALORE NUMBER 17. Applicant's home address and e-mail address Telephone number(s) Visa decision: Address should be as per the passport BIO Page TWO ALTERNATIVE □ Refused if its different address proof is required NUMBER 18. Residence in a country other than the country of current nationality □ Issued: n A пC □ Yes. Residence permit or equivalent. ... No. Valid until □ LTV 19. Current occupation □ Valid: From Until MENTION DESIGNATION Number of entries: □ 1 □ 2 □ Multiple

NAME SHOULD BE AS PER THE PASSPORT

AFFIX THE PHOTOGRAPH AS

MENTION MINOR DETAILS IF ITS APPLICABLE

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36. Place and date 37		ors, signature of parental		
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SUBMISSION AND PLACE				

SIGNATURE OF THE APPLICANT IF IT'S FOR MINOR (BELOW 18YEAR) FATHER AND MOTHER OR LEGAL GUARDIAN SIGNATURE IS REQUIRED I am aware that the visa fee is not refunded if the visa is refused.

Applicable in case a multiple-entry visa is applied for (cf. field no 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.

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 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:

[Office of Immigration and Nationality; Address: H- 1117 Budapest, Budafoki út 60. Tel.: +36 1 4639100].

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 State concerned. The national supervisory authority of that Member State [Authority for Data Protection and Freedom of Information; Address: H-1024 Budapest, Szilágyi Erzsébet fasor 22/C.; Tel.: +36 (1) 391-1400; Fax: +36 (1) 391-1410; e-mail: ugyfelszolgalat@naih.hu; website: www.naih.hu] 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 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.

Place and date

MENTION DATE OF SUBMISSION AND PLACE Signature

(for minors, signature of parental authority/legal guardian):

SIGNATURE OF THE APPLICANT IF IT'S FOR MINOR (BELOW 18YEAR) FATHER AND MOTHER OR LEGAL GUARDIAN SIGNATURE IS REQUIRED

DECLARATION

the	Processing Time: VFS Global s Consulate General of Hungary is than 15 calendar days, but still I	s 15 (f	lifteen) calendar days. The actu	al tim	ne left to my intended travel is	
from my fact deci	Missing or inadequate document are mandatory for processing on my file or inadequate. However failing to comply with the visa per that this incomplete or inadequation in my visa application. It itional documents or calling me failing me faili	of my er, I go roced uate may	y visa application at the Consula o for submitting my visa applica tural rules of the Consulate Gen file will be the sole basis of th refuse my visa application witl	ate Go ation eral o e Co	eneral of Hungary are missing and take full responsibility for of Hungary. I am aware of the nsulate General of Hungary's	
	Documents relevant for any travel where appropriate		For tourists	For visiting a family member or friend		
	Parental declaration		Certificate of the travel agency		Invitation letter	
	Accommodation		Employment certificate or educational institution enrollment certificate		Employment certificate or educational institution enrollment certificate	
	Airplane ticket booking		For educational and scientific program or professional training	For business trip		
	Travel medical insurance		Certificate of the receiving institution		Employment certificate	
	Salary slip or pension slip		Employment certificate or higher educational institution enrollment certificate along with transcripts and diploma		Invitation letter or letter of reference in Hungarian	
	Bank account statement		English language test result	For conference		
	Certificate of registration	For	r cultural or sport activity	Invitation or confirmation of registration		
	Income tax return acknowledgment		Letter of accreditation, registration or invitation		Employment certificate or educational institution enrollment certificate	
	For EU family member		Reference letter	For medical treatment		
	EU national's passport copy				Certificate of the receiving health institution	
	Marriage or birth certificate					
	Invitation letter					

 $^{^{\}rm 1}$ Documents which should be submitted in original are $\underline{\rm underlined}$ in the table.

I fully understand that:

- The processing of the application including time, request for additional documents or call for an
 interview is subject to the procedures and timelines of the Consulate General of Hungary and VFS
 Global has no control over it. In case of any delay I agree to reschedule my travel itinerary and
 related bookings and documents.
- I am responsible for the accuracy and completeness of my application. In case of any additional
 documents required by the Consulate General of Hungary, I am aware that I need to submit the
 documents at VFS Global application center or at the Consulate General of Hungary and the
 processing time for my application may increase.
- During the time of the assessment of my visa application the Consulate General of Hungary will not
 answer any form of enquiry regarding state or outcome of the procedure.
- Grant or refusal of visa is at the sole discretion of the Consulate General of Hungary and VFS Global
 has no role in the decision making process and no promises have been made by any VFS Global
 staff on this account.
- The mere possession of a visa does not confer an automatic right of entry to Hungary or any other Schengen States of the European Union. I may be requested at the entry border checking point to present any supporting documents submitted with my visa application.

SIGNATURE OF THE APPLICANT IF IT'S FOR MINOR (BELOW 18YEAR)
FATHER AND MOTHER OR LEGAL GUARDIAN SIGNATURE IS REQUIRED

Place and Date		Signature
	Name (with block capitals)	