

GENERAL CONSULATE OF GREECE
IN JOHANNESBURG

APPLICATION

SURNAME ΕΠΩΝΥΜΟ	
NAME ΟΝΟΜΑ	
NAME OF FATHER ΟΝΟΜΑ ΠΑΤΡΟΣ	
NAME OF MOTHER ΟΝΟΜΑ ΜΗΤΡΟΣ	
NAME OF SPOUSE ΟΝΟΜΑ ΣΥΖΥΓΟΥ	
OCCUPATION ΕΠΑΓΓΕΛΜΑ	
RESIDENTIAL ADDRESS Δ/ΝΣΗ ΚΑΤΟΙΚΙΑΣ	
TEL ΤΗΛΕΦΩΝΟ	

DATE AND PLACE OF BIRTH ΗΜΕΡΟΜΗΝΙΑ & ΤΟΠΟΣ ΓΕΝΝΗΣΕΩΣ	
PASSPORT NO & DATE OF ISSUE ΑΡ. & ΗΜΕΡ. ΕΚΔΟΣΕΩΣ ΔΙΑΒΑΤΗΡΙΟΥ	
ISSUED BY ΕΚΔΟΘΗΚΕ ΑΠΟ	

NEED TO APPLY FOR ΚΑΝΩ ΑΙΤΗΣΗ ΓΙΑ	
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JOHANNESBURG, _____ 200

SIGNATURE/ ΥΠΟΓΡΑΦΗ:

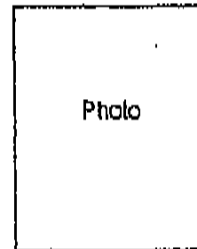
FOR OFFICE USE: A.B.E No _____,



CONSULATE GENERAL OF GREECE
JOHANNESBURG

Application for Schengen Visa

This Application form is free



Photo

1 Surname(s) (family name(s))

2 Surname(s) at birth (earlier family name(s))

3 First names (given names)

4 Date of birth (year-month-day) 5 ID-number (optional)

6 Place and country of birth

7 Current nationalities 8 Original nationality (nationality at birth)

9 Sex
 Male Female

10 Marital status:
 Single Married Separated
 Divorced Widow(er) Other

11 Father's name 12 Mother's name

13 Type of passport:
 National passport Diplomatic passport Service passport Travel document (1951 Convention)
 Alien's passport Seaman's passport Other travel document (please specify):

14 Number of passport 15 Issued by

16 Date of issue 17 Valid until

18 If you reside in a country other than your country of origin, have you permission to return to that country?
 No Yes (number and validity)

*19 Current occupation

*20 Employer and employer's address and telephone number. For students, name and address of school.

21 Main destination 22 Type of Visa:
 Airport transit Transit Short stay Long stay

23 Visa
 Individual Collective

24 Number of entries requested
 Single entry
 Two entries
 Multiple entries

25 Duration of stay
Visa is required for: _____ days

26 Other visas (issued during the past three years) and their period of validity

27 In the case of transit, have you an entry permit for the final country of destination?
 No Yes, valid until _____ issuing authority.

*28 Previous stay in this or other Schengen States

For Embassy/Consulate use only

Date of application

File handled by:

Supporting Documents

- Valid Passport
- Financial means
- Invitation
- Means of transport
- Health insurance
- Other:

Visa

- Refused
- Granted

Characteristics of Visa

- LTV
- A
- B
- C
- D
- D-C

Number of entries

- 1 One
- 2 Two
- Multiple

Valid from.....
to

Valid for:

Tourism
 Business
 Visit to family or friends
 Cultural/Sports
 Official
 Medical reasons
 Other (please specify)

For Embassy/Consulate use only

*30 Date of arrival	*31 Date of departure
*32 Border of first entry or transit route	*33 Means of transport

*34 Name of host or company in the Schengen States and contact person in host company. If not applicable, give name of hotel or temporary address in the Schengen States

Name	Telephone and telefax
Full address	E-mail address

*35 Who is paying for your cost of travelling and for your costs of living during your stay?

Myself
 Host person/s
 Host company (State who and how and present corresponding documentation)

*36 Means of support during your stay

Cash
 Travellers' cheques
 Credit cards
 Accommodation
 Other
 Travel and/or health insurance, Valid until

37 Spouse's family name	38 Spouse's family name at birth	
39 Spouse's first name	40 Spouse's date of birth	41 Spouse's place of birth

12 Children (Applications must be submitted separately for each passport)

Name	First Name	Date of birth
1.		
2.		
3.		

3 Personal data of the EU or EEA citizen you depend on. This question should be answered only by family members of EU or EEA citizens

Name	First Name	
Date of birth	Nationality	Number of passport
Family relationship of an EU or EEA citizen		

4 I am aware of and consent to the following: any personal data concerning me which appear on this visa application form will be supplied to the relevant authorities in the Schengen States and processed by those authorities, if necessary, for the purposes of a decision on my visa application. Such data may be input into, and stored in databases accessible to the relevant authorities in the various Schengen States.

At my express request, the consular authority processing my application will inform me on the manner in which I may exercise my right to check the personal data concerning me and have them altered or deleted, in particular, should they be inaccurate in accordance with the national law of the State concerned.

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 Schengen State which deals with the application. I undertake to leave the territory of the Schengen States upon 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 Schengen 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 the Schengen Implementing Convention and am thus refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Schengen States.

5 Applicant's home address	46 Telephone number
7 Place and date	48 Signature (for minors, signature of custodian/guardian)