**Schengen Visa Questionnaire**

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|  |  | | |
| Name of the Applicant | |  | | | |
| Email Address | |  | | | |
| Phone Number | |  | | | |
| Marital Status (Married?) Yes or NO | | NO | | | |
| Name of Spouse | | |  |
| Date of Birth | | |  |
| Place of Birth | | |  |
| Nationality | | |  |
| Home address in UAE | |  | | | |
| Home Postal Code: | |  | | | |
| Emirates ID Number | |  | | | |
| Company address in UAE | |  | | | |
| Company Postal Code: | |  | | | |
| Company Tel. No. / Email Address: | |  | | | |
| Destinations Country or Countries | |  | | | |
| Which country you will enter first | |  | | | |
| Do you need Single/Double or Multiple Entry | |  | | | |
| Number of Days you will stay in Europe? | |  | | | |
| Record of Previously Schengen Visas Number in Last 3 Years.(Issue date & Expiry Date): | |  | | | |
| Have you given Finger Prints for Schengen Visa Previously. Date? (dd-mm-yyyy) | |  | | | |
| Date of Entry in Schengen | |  | | | |
| Date of Exit from Schengen | |  | | | |
| Cost of your flight and stay will be covered by | |  | | | |
| Name of Company Sponsoring You | | Company / Yourself | | | |
|  | | Name : |  | | |
|  | | Address |  | | |
|  | | Phone |  | | |
|  | | Email |  | | |
| How will you pay for this Visit (Cash, Credit Card, Travellers Cheques) | |  | | | |
| Family and Relative in European Union (Please provide full details of any close relative nationality and residence in EU if any? | | | | | |
| Surname | |  | | | |
| First Name | |  | | | |
| Date of Birth | |  | | | |
| Passport Number / ID # | |  | | | |
| Address | |  | | | |
| Contact Number | |  | | | |
| Nationality | |  | | | |
| Relationship to the person. | |  | | | |

**Required Documents**:

1. Passport copy, Residence Visa Copy, Emirates ID Copy
2. No objection Certificate from company/Sponsor copy
3. 6 months Bank Statement Original (Electronic or Hard copy)
4. Business Invitation (If Business)
5. Previous Schengen Visa copies Required.
6. Vaccination Certificate.

Call +971566778825 for any more information.