

### **ANNEX 33**

#### **SPECIMEN HARMONISED FORMS PROVIDING PROOF OF INVITATION, SPONSORSHIP AND ACCOMMODATION DRAFTED BY THE CONTRACTING PARTIES**

This document was established by the Secretariat General of the Council of the European Union. Only the consolidated version submitted by the Secretariat General of the Council of the European Union is published on Circa network.

**Specimen of Austria's form of providing proof of sponsorship  
and/or private accommodation**

**Elektronische Verpflichtungserklärung ID Nummer:**  
**Electronic Declaration of Commitment ID Number**

Ich bestätige, dass die Angaben laut beiliegendem Formular korrekt und nach bestem Wissen gemacht wurden. Ich nehme zur Kenntnis, dass wissentlich falsche Angaben gegenüber einer Behörde zu einer strafrechtlichen Verfolgung führen können.

*I confirm that the information in the attached form is correct and is given to the best of my knowledge. I acknowledge that knowingly providing false information to an authority may result in criminal prosecution.*

**Mit Abgabe dieser Verpflichtungserklärung verpflichte ich mich, für den Unterhalt und die Unterkunft der eingeladenen Person(en) und deren in Österreich geborenen leiblichen Nachkommen aufzukommen. Ich verpflichte mich weiters, der Republik Österreich, den Ländern, Gemeinden und anderen öffentlichen Rechtsträgern alle Kosten, die ihnen im Zusammenhang mit der Einreise und dem Aufenthalt der eingeladenen Person(en) und deren in Österreich geborenen leiblichen Nachkommen – auch wenn dieser, aus welchen Gründen immer, über den Zeitraum der Einladung hinausgeht – sowie der Ausreise aus dem Gebiet der Schengener Vertragsstaaten sowie allfälliger fremdenpolizeilicher Maßnahmen entstehen, binnen 14 Tagen ab Zahlungsaufforderung bei sonstiger gerichtlicher Geltendmachung zu bezahlen.**

*By submitting this Declaration of Commitment I undertake to pay for the maintenance and accommodation of the invited person(s) and their biological offspring born in Austria. I further undertake to reimburse the Republic of Austria, its provinces, municipalities and other public legal entities for all costs incurred in connection with the entry and stay of the invited person(s) and their biological offspring born in Austria – even if their stay, for whatever reasons, extends beyond the period of the invitation – as well as for the costs of the departure from the territory of the Schengen States and the costs of any measures taken by the Aliens Police. I shall pay for these costs within 14 days of the request for payment; otherwise, the request for payment will be subject to legal enforcement.*

\_\_\_\_\_  
Ort  
Place

\_\_\_\_\_  
Datum  
Date

\_\_\_\_\_  
Unterschrift  
Signature

- Die einseitige Zurückziehung der Verpflichtungserklärung – aus welchen Gründen auch immer – ist nicht möglich.

*It is not possible, for whatever reasons, to unilaterally withdraw the Declaration of Commitment.*

- Durch diese Verpflichtungserklärung sind beispielsweise Kosten für Fürsorgeleistungen und Aufwendungen für medizinische Betreuung erfasst. Ich nehme zur Kenntnis, dass die Abgabe einer Verpflichtungserklärung im Anlassfall zu einer finanziellen Belastung werden könnte und habe mir die Unterschriftsleistung gründlich überlegt.

*This Declaration of Commitment covers, for example, costs of welfare benefits and medical care. I acknowledge that the submission of a Declaration of Commitment could become a financial burden in the event of an incident and I have thoroughly considered the implications of signing the Declaration of Commitment.*

- Ich nehme zur Kenntnis und erkläre mich damit einverstanden, dass im Zusammenhang mit der Prüfung dieser Verpflichtungserklärung und der Bearbeitung des bezughabenden Visumaktes Daten erfasst und vom Bundesministerium für Inneres (Herrengasse 7, A-1010 Wien; Tel.: +43 1 53 126-0; E-Mail: post@bmi.gv.at), vom Bundesministerium für

europäische und internationale Angelegenheiten, von den Landespolizeidirektionen und von den Vertretungsbehörden im Ausland für die Zwecke des Visumverfahrens sowie für statistische Zwecke verarbeitet werden. Ich besitze ein Recht auf Auskunft gemäß Art. 37 Abs. 1 der Verordnung (EG) Nr. 767/2008 des Europäischen Parlaments und des Rates vom 9. Juli 2008 über das Visa-Informationssystem (VIS) und den Datenaustausch zwischen den Mitgliedstaaten über Visa für einen kurzfristigen Aufenthalt. Die staatliche Aufsichtsbehörde, die Österreichische Datenschutzbehörde (Barichgasse 40-42, A-1030 Wien; Tel.: +43 1 52 152-0; E-Mail: dsb@dsb.gv.at) ist zuständig für Beschwerden über den Schutz personenbezogener Daten.

*I acknowledge and agree that data will be collected and processed by the Federal Ministry of the Interior of the Republic of Austria (Herrengasse 7, A-1010 Vienna; Tel.: +43 1 53 126-0; E-mail: post@bmi.gv.at), by the Federal Ministry for European and International Affairs of the Republic of Austria, by the Regional Police Directorates, and by the diplomatic missions of Austria for the purposes of the visa proceedings and for statistical purposes in connection with the examination of this Declaration of Commitment and the processing of the related visa file. I have a right of information in accordance with Article 37 (1) of the Regulation (EC) No 767/2008 of the European Parliament and of the Council of 9 July 2008 concerning the Visa Information System (VIS) and the exchange of data between Member States on short-stay visas. The national supervisory authority, the Austrian Data Protection Authority (Barichgasse 40-42, A-1030 Vienna; Tel.: +43 1 52 152-0; E-mail: dsb@dsb.gv.at), will hear claims concerning the protection of personal data.*

- So ich eine juristische Person oder Einzelunternehmung bin und ich eine Einladung zu wirtschaftlichen oder beruflichen Zwecken ausspreche, lege ich zwecks Prüfung meiner Bonität den Auszug eines österreichischen Kreditschutzverbandes (AKV – Alpenländischer Kreditorenverband, Creditreform Wirtschaftsauskunftei Kubicki KG, KSV 1870 – Kreditschutzverband) vor. Ich nehme zur Kenntnis, dass, wenn kein KSV-Auszug sondern sonstige Unterlagen wie eine Unternehmensbilanz oder Einnahmen-Ausgabenrechnung vorgelegt werden, diese an das Bundesministerium für Inneres zur weiteren Prüfung übermittelt werden und eine entsprechende Bearbeitungszeit einzurechnen ist.

*If I am a legal entity or sole proprietorship and if I issue an invitation for commercial or professional purposes, I shall submit a credit report drawn up by an Austrian credit rating agency (AKV - Alpenländischer Kreditorenverband, Creditreform Wirtschaftsauskunftei Kubicki KG, KSV 1870 - Kreditschutzverband) so that my creditworthiness can be checked. I acknowledge that if no credit report but other documents such as a company balance sheet or an income and expenditure account are submitted, these will be forwarded to the Federal Ministry of the Interior of the Republic of Austria for further examination, which will take additional processing time.*

- **Die Abgabe einer Verpflichtungserklärung führt nicht automatisch zur Erteilung eines Visums.** Bei der Entscheidung sind neben finanziellen Aspekten einer Verpflichtungserklärung auch sämtliche persönlichen Verhältnisse des Visumwerbers (des Eingeladenen) sowie insbesondere die sich daraus ergebende gesicherte Wiederausreise des Visumwerbers von der verfahrensführenden Vertretungsbehörde zu berücksichtigen.

*The submission of a Declaration of Commitment does not automatically result in the issuing of a visa to the applicant. In addition to the financial aspects of a Declaration of Commitment, the decision of the diplomatic mission conducting the proceedings will also be based on all personal circumstances of the visa applicant (the invited person) and, in particular, on the resultant guaranteed return of the visa applicant.*

- Ich nehme zur Kenntnis, dass die elektronische **Übermittlung der Verpflichtungserklärung an die zuständige Vertretungsbehörde rund 48 Stunden dauert** und werde dies dem Visumwerber ebenfalls zur Kenntnis bringen. Dieser wendet sich **frühestens nach Ablauf dieser 48 Stunden unter Angabe der vergebenen ID-Nummer** und unter Vorlage der sonstigen Visumunterlagen an die für ihn örtlich zuständige Vertretungsbehörde, um seinen Visumantrag mit dem dafür vorgesehenen

Formular einzubringen. Die Verpflichtungserklärung kann die Vertretungsbehörde danach mittels besagter ID-Nummer selbstständig abrufen.

*I acknowledge that the electronic **transmission of the Declaration of Commitment to the competent diplomatic mission takes about 48 hours** and I will bring this to the attention of the visa applicant. **Following these 48 hours at the earliest**, the applicant shall contact the local diplomatic mission responsible for him/her, **state the assigned ID number** and present any other visa documents in order to submit his/her visa application using the form provided for this purpose. The diplomatic mission can then retrieve the Declaration of Commitment by means of the aforementioned ID number.*

- Eventuelle Terminvergaben für Antragstellungen bei den Vertretungsbehörden sind je nach Land unterschiedlich gestaltet und hat dies der Visumwerber entsprechend zu berücksichtigen.

*The visa applicant shall take into account that the process of arranging appointments for the application with the diplomatic missions may vary from one country to another.*

- Ich nehme zur Kenntnis, dass mir aus der Abgabe der Verpflichtungserklärung keine Parteienstellung erwächst. Partei des Verfahrens zur Visumerteilung bleibt allein der Visumwerber. Ich erhalte daher aus datenschutzrechtlichen Gründen zu keiner Zeit des Verfahrens Auskünfte über Stand und Inhalt des Verfahrens. Diese erhält allein der Visumwerber im Wege der verfahrensführenden Vertretungsbehörde.

*I acknowledge that by submitting the Declaration of Commitment, I do not become a party to the proceedings. Only the visa applicant is a party to the visa application proceedings. For data protection reasons, I will therefore not receive any information about the status and content of the proceedings at any time for the duration of the proceedings. Only the visa applicant shall receive this information through the diplomatic mission conducting the proceedings.*

- Ich nehme zur Kenntnis, dass dem Visumwerber oder dessen rechtlichem Vertreter im Falle der Akteneinsicht während des Verfahrens auch die Einsichtnahme in diese Unterlagen (Verpflichtungserklärung) gewährt werden muss.

*I acknowledge that in the event of access to the file during the proceedings, the visa applicant or his/her legal representative shall also be granted access to these documents (the Declaration of Commitment).*

- Die Behörde, bei der ich diese Verpflichtungserklärung abgegeben habe, hat keinen Einfluss auf das Visumverfahren.

*The authority to which I have submitted the Declaration of Commitment has no influence on the visa procedure.*

- Eine Rückfrage beim Bundesministerium für europäische und internationale Angelegenheiten oder beim Bundesministerium für Inneres führt zu keinem schnelleren Aktenlauf, da dieser nicht manuell beeinflusst werden kann.

*Enquiries with the Federal Ministry for European and International Affairs of the Republic of Austria or with the Federal Ministry of the Interior of the Republic of Austria do not accelerate the processing of the file, as this cannot be influenced manually.*

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Ort  
Place

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Datum  
Date

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Unterschrift  
Signature

Specimen of Belgium's form of providing proof of sponsorship and/or private accommodation



**E. L'engagement de prise en charge comme preuve des moyens de subsistance suffisants pour un court séjour en Belgique / Formal obligation as proof of the required means of subsistence for a short stay in Belgium**

Le ressortissant de pays tiers pris en charge peut produire ce document comme preuve de ses moyens de subsistance suffisants pour un court séjour en Belgique, à condition que cette première partie soit imprimée recto/verso, qu'elle n'ait pas été modifiée et que l'autorité compétente l'ait acceptée (voir F).

Ce document doit également être produit dans les six (6) mois qui suivent celui au cours duquel la signature du garant a été légalisée. Au-delà de ce délai, ce document ne sera plus considéré comme une preuve des moyens de subsistance suffisants du ressortissant de pays tiers pris en charge.

*The third-country national being taken care of may produce this document as a proof of sufficient means of subsistence for a short stay in Belgium, provided that the first part is printed on both sides, that it was not modified and that it was accepted by the competent authority (see F).*

*This document must be produced within six (6) months following that of its legalization. After this deadline, it will no longer be considered as a proof of sufficient means of subsistence for the third-country national taken care of.*

**F. Décision (cadre réservé au Bourgmestre ou à son délégué et aux consulats belges) / Decision (reserved for the Mayor or his/her deputy and for the Belgian Consulates)**

<p><b>En vertu de l'article (à compléter) de l'arrêté royal du 8 octobre 1981 sur l'accès au territoire, le séjour, l'établissement et l'éloignement des étrangers:</b></p> <p><input type="checkbox"/> cet engagement de prise en charge est <b>ACCEPTÉ</b>.</p> <p><input type="checkbox"/> cet engagement de prise en charge <b>n'est PAS CONFORME</b>, car :</p> <ul style="list-style-type: none"> <li>○ ce n'est pas l'original ;</li> <li>○ il n'est pas entièrement complété, daté et signé par le garant</li> <li>○ il n'est pas légalisé par l'autorité communale compétente ;</li> <li>○ il est produit hors délai ;</li> <li>○ il n'a pas été imprimé recto-verso ;</li> <li>○ il a été modifié ;</li> <li>○ les documents suivants ne sont pas produits : <ul style="list-style-type: none"> <li>△ la preuve des revenus perçus par le garant ou, si le garant est indépendant, la copie de son dernier avertissement extrait de rôle ou, à défaut de ces documents, tout autre document officiel informant valablement sur la situation financière du garant ;</li> <li>△ la copie de la carte d'identité ou de la carte de séjour du garant, en cours de validité.</li> </ul> </li> <li>○ ...</li> </ul> <p><input type="checkbox"/> cet engagement de prise en charge est <b>REFUSÉ</b>, car :</p> <ul style="list-style-type: none"> <li>○ il est faux, falsifié ou contrefait ou les documents visés à l'article 17/3 sont faux, falsifiés ou contrefaits: .....</li> <li>○ le garant n'est pas belge ou autorisé ou admis au séjour pour une durée illimitée: .....</li> <li>○ le garant n'a pas de ressources suffisantes: .....</li> </ul> <p>Décision prise le ..... par le Ministre ou son délégué/le Consulat belge à ..... (biffer la mention inutile).</p> <p><b>Acte de notification</b></p> <p>Je soussigné (identité et qualité de l'autorité)....., ai notifié en date du ..... la décision.</p>	<p><b>In accordance with (note the relevant article) of the Royal Decree of 8 October 1981 regarding the access to the territory, the stay, the residence and the removal of foreigners,</b></p> <p><input type="checkbox"/> the formal obligation is <b>ACCEPTED</b>.</p> <p><input type="checkbox"/> the formal obligation <b>DOES NOT COMPLY</b> because:</p> <ul style="list-style-type: none"> <li>○ this is not the original version;</li> <li>○ it is not duly completed, dated and signed by the guarantor;</li> <li>○ it is not legalised by the competent municipal authority;</li> <li>○ it was produced out of time;</li> <li>○ it was not printed on both sides;</li> <li>○ it was modified;</li> <li>○ the following documents have not been submitted: <ul style="list-style-type: none"> <li>△ the proof of income earned by the guarantor or, if he/she is self-employed, a copy of his/her most recent tax certificate or, in the absence thereof, any other official document providing evidence of his/her financial situation;</li> <li>△ a copy of the guarantor's identity card or valid residence permit.</li> </ul> </li> <li>○ ...</li> </ul> <p><input type="checkbox"/> the formal obligation is <b>REFUSED</b> because:</p> <ul style="list-style-type: none"> <li>○ it is false, falsified or forged or the documents referred to in Article 17/3 are false, falsified or forged: .....</li> <li>○ the guarantor is not Belgian, nor is he authorized or allowed to stay for an unlimited period of time: .....</li> <li>○ the guarantor does not have sufficient resources: .....</li> </ul> <p>Decision taken on ..... by the Minister or his/her deputy / the Belgian Consulate at ..... (delete as appropriate).</p> <p><b>Act of notification</b></p> <p>I, the undersigned (identity / status of the authority and seal)....., notified the decision on .....</p>
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**PARTIE II – INFORMATION (à conserver par le garant et le ressortissant de pays tiers pris en charge/ INFORMATION (to be kept by the guarantor and the third country national being care for)**

1. Conformément à l'article 17/5 de l'arrêté royal du 8 octobre 1981, le garant dont l'engagement de prise en charge a été accepté est responsable, solidairement avec la personne prise en charge, du paiement de ses frais de séjour, de soins de santé et de rapatriement, pendant une période de deux ans, à partir du jour où cette personne est entrée légalement sur le territoire des Etats membres de l'Espace Schengen.

Le cas échéant, le remboursement de ces frais est poursuivi par l'Etat et le C.P.A.S. compétent, conformément aux articles 17/7 à 17/9 de l'arrêté royal du 8 octobre 1981.

*In accordance with article 17/5 of the Royal Decree of 8 October 1981, the guarantor whose formal obligation was accepted, together with the foreigner being cared for, is severally liable for paying his/her costs for healthcare, stay and repatriation costs during a period of two years from the day the foreigner legally entered the territory of the Member States of the Schengen area.*

*As the occasion arises, the reimbursement of these costs is claimed by the State and the competent social service department, in accordance with the articles 17/7 to 17/9 of the Royal Decree of 8 October 1981.*

2. Le garant peut se désister de son engagement de prise charge et il est exonéré de sa responsabilité dans les limites prévues par l'article 17/6.

*The guarantor can renounce his/her formal obligation and may be exempted from his/her liability within the limits provided for by article 17/6.*

3. Une brochure d'information a été mise à disposition du garant concernant le traitement de ses données à caractère personnel.

*An information leaflet has been made available to the guarantor about the processing of his/her personal data.*

4. En vertu de l'article 39/2, § 2 de la loi du 15 décembre 1980, la décision par laquelle l'engagement de prise en charge est déclaré irrecevable ou est refusé est susceptible d'un recours en annulation auprès du Conseil du Contentieux des Etrangers. Ce recours doit être introduit, par voie de requête, dans les trente jours de la notification de cette décision. Une demande de suspension peut être introduite conformément à l'article 39/82 de la loi du 15 décembre 1980. Sauf en cas d'extrême urgence, la demande de suspension et le recours en annulation doivent être introduits par un seul et même acte.

Sans préjudice des autres modalités légales et réglementaires, le recours et la demande visés ci-dessus sont formés par voie de requête, laquelle doit remplir les conditions mentionnées dans l'article 39/78 de la loi du 15 décembre 1980 et dans l'article 32 du Règlement de procédure du Conseil du Contentieux des Etrangers. Ils sont introduits auprès du Conseil par pli recommandé, sous réserve des dérogations prévues par l'article 3, § 1<sup>er</sup>, alinéas 2 et 4 du RP CCE, au Premier Président du Conseil du Contentieux des Etrangers, rue Gaucheret 92-94 à 1030 Bruxelles.

Sous réserve de l'application de l'article 39/79 de la loi du 15 décembre 1980, l'introduction d'un recours en annulation et d'une demande de suspension n'a pas pour effet de suspendre l'exécution de la présente mesure

*The decision by means of which the formal obligation is declared inadmissible or is refused, in accordance with article 39/2, § 2, of the law of 15 December 1980, is subject to an appeal for annulment at the Council for Alien Law Litigation, that needs to be introduced by means of an application, within thirty days after the notification of this decision. A claim for suspension can be introduced in accordance with article 39/82 of the law of 15 December 1980. Except in case of extreme urgent necessity both the claim for suspension and the appeal for annulment need to be introduced in a single act.*

*Without prejudice to other legal and regulatory terms, the appeal and the claim mentioned above are introduced by means of an application, that needs to meet the requirements mentioned in article 39/78 of the law of 15 December 1980 and in article 32 of the procedure regulation of the Council for Alien Law Litigation. They are introduced at the Council by means of a registered letter, subject to the derogations provided for by article 3, § 1, subsections 2 and 4, of the procedure regulation of the Council for Alien Law Litigation, to the First President of the Council for Alien Law Litigation, Rue Gaucheret 92-94, 1030 Brussels.*

*Subject to the application of article 39/79 of the law of 15 December 1980, the introduction of an appeal for annulment and of a claim for suspension does not suspend the execution of this measure.*

5. Lorsque le ressortissant de pays tiers pris en charge doit être muni d'un visa pour le court séjour envisagé en Belgique et qu'il demandera ce visa auprès d'un consulat belge, l'engagement de prise en charge est remis au garant directement après avoir été légalisé. L'engagement de prise en charge légalisé et les documents justificatifs doivent ensuite être produits à l'appui de la demande de visa dans les six mois qui suivent celui au cours duquel la signature du garant a été légalisée, sous peine d'être déclaré irrecevable.

*When the third-country national being cared for must be in possession of a visa for the short stay intended in Belgium and the visa application will be submitted to a Belgian consulate, the formal obligation is provided to the guarantor directly after being legalized. The legalized formal obligation and the accompanying documents must then be produced to support the visa application, within six months following that of its legalization of the signature of the guarantor, on pain of inadmissibility.*

6. Lorsque le ressortissant de pays tiers pris en charge doit être muni d'un visa pour le court séjour envisagé en Belgique et qu'il demandera ce visa auprès d'un consulat d'un autre Etat Schengen, l'engagement de prise en charge, s'il a été accepté, doit être produit à l'appui de la demande dans les six mois qui suivent celui au cours duquel la signature du garant a été légalisée. S'il est produit hors délai, l'engagement de prise en charge sera réputé ne jamais avoir été accepté et ne sera pas pris en considération comme preuve des moyens de subsistance requis.

*When the third-country national being cared for must be in possession of a visa for the short stay intended in Belgium and the visa application will be submitted to a consulate of another Schengen Member State, the formal obligation, if accepted, must be produced to support the visa application, within six months following that of its legalization of the signature of the guarantor. If this condition is not met, the formal obligation shall be deemed never to have been accepted and shall not be taken into account as proof of the required means of subsistence*

7. Lorsque le ressortissant de pays tiers pris en charge ne doit pas être muni d'un visa pour le court séjour envisagé en Belgique, l'engagement de prise en charge, s'il a été accepté, doit être utilisé pour entrer dans l'Espace Schengen dans les six mois qui suivent celui au cours duquel la signature du garant a été légalisée. S'il est produit hors délai, l'engagement de prise en charge sera réputé ne jamais avoir été accepté et ne sera pas pris en considération comme preuve des moyens de subsistance requis.

*When the third-country national being cared for does not need to be in possession of a visa for the short stay intended in Belgium, the formal obligation, if accepted, must be used to enter the Schengen area within six months from the date the formal obligation was legalized following that of its legalization of the signature of the guarantor. If this condition is not met, the formal obligation shall be deemed never to have been accepted and shall not be taken into account as proof of the required means of subsistence.*

**VERBINTENIS TOT TENLASTENEMING** aangegaan overeenkomstig artikel 3bis van de wet van 15 december 1980 betreffende de toegang tot het grondgebied, het verblijf, de vestiging en de verwijdering van vreemdelingen / **FORMAL OBLIGATION** made in accordance with article 3bis of the law of 15 December 1980 regarding the access to the territory, the stay, the residence and the removal of foreigners, hereafter called the law of 15 December 1980

**DEEL I** (voor te leggen door de ten laste genomen onderdaan van het derde land bij de visumaanvraag en/of bij de controle aan de buitengrenzen) / **PART I** (to be submitted by the third-country national taken care of when applying for a visa and/or during checks at the external borders)

**A. Informatie over de garant (in te vullen door de garant) / About the guarantor (to be completed by the guarantor)**

1. Naam/Name:		2. Voorna(a)m(en)/First name(s):	
3. Geboortedatum /Date of birth:		4. Geboorteplaats /Place of birth:	
5. Nationaliteit/Nationality:			
6. N° Identiteitsdocument of verblijfstitel / Identity document or residence permit nr.			
7. Adres/Address:		8. Telefoonnummer /Telephone number:	
		9. E-mailadres / E-mail address:	
		10. Beroep/Occupation:	

**B. Informatie over de ten laste genomen onderdaan van het derde land (in te vullen door de garant) / About the third-country national being cared for (to be completed by the guarantor)**

1. Naam/Name:		2. Voorna(a)m(en)/First name(s):	
3. Geboortedatum /Date of birth:		4. Geboorteplaats/Place of birth:	
5. Nationaliteit/Nationality:			
6. Geslacht/Sex: 0 vrouwelijk/female 0 mannelijk/male		7. Paspoort nr./Passport nr.	
8. Moet worden voorzien van een visum voor een kort verblijf in België/ Must be in possession of a visa for a short stay in Belgium. <input type="checkbox"/> Nee/No <input type="checkbox"/> Ja/Yes De visumaanvraag zal worden ingediend/The visa application will be lodged o in een Belgisch consulaat/in a Belgian consulate o in een consulaat van een andere Schengenstaat/in a consulate of another Schengen State			
9. Adres in het land van herkomst of het land waar men gewoonlijk verblijft en land / Address in the country of origin or the country of usual residence:			
10. Doel van het verblijf /Object of the stay: <input type="checkbox"/> Toerisme/Tourism <input type="checkbox"/> Zaken/Business <input type="checkbox"/> Cultuur/Culture <input type="checkbox"/> Sport/Sports <input type="checkbox"/> Officieel bezoek/Official visit <input type="checkbox"/> Opleiding/Training <input type="checkbox"/> Familiebezoek of bezoek aan vrienden/Visiting relatives or friends <input type="checkbox"/> Medische redenen /Medical Reasons <input type="checkbox"/> Andere (te vermelden) / Other (to be determined):			
11. Duur van het verblijf/Duration of the stay :		dagen/days	
12. Huisvestingsadres / Address of accommodation:			
13. Verwantschapsband met de garant. /Relationship with the guarantor :			

**C. Verklaring van de garant / Guarantor declaration**

Ik verbind mij ten opzichte van de Belgische Staat, van elk bevoegd O.C.M.W. en van de hierboven vernoemde onderdaan van een derde land om diens kosten van gezondheidszorgen, verblijf en repatriëring ten laste te nemen/I commit myself with regard to the Belgian State, to each competent social service department and to the third-country national mentioned below to account for his/her costs of healthcare, stay and repatriation costs.

Ik verklaar dat de gegevens in deze verbintenis tot tenlasteneming correct en volledig zijn. Ik verbind mij ertoe om elke wijziging van deze gegevens door te geven aan de Federale Overheidsdienst Binnenlandse Zaken, Dienst Vreemdelingenzaken, Directie Toegang en verblijf, Pachecolaan 44, te 1000 Brussel (België) // hereby declare that the data in this formal obligation are correct and complete. / I undertake to communicate any modifications to the Federal Public Service Home Affairs- Aliens Office- Directorate Access and Stay, which is located at the following address: Pachecolaan 44, 1000 Brussels (Belgium)

Ik erken kennis te hebben genomen van de inlichtingen in deel II van deze bijlage // I acknowledge having read the information in the second part of this annex (Part II).

**D. Legalisatie van de handtekening van de garant / Legalization of the signature of the guarantor .**

Handtekening van de garant /Signature of the guarantor:	Legalisatie handtekening van de garant /Legalization of the signature of guarantor :  Te/In _____ , op/on _____  De Burgemeester of zijn gemachtigde STEMPEL/STAMP The mayor or his/her deputy
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**E. De verbintenis tot ten lasteneming als bewijs van de voldoende bestaansmiddelen voor een kort verblijf in België / *Formal obligation as proof of the required means of subsistence for a short stay in Belgium***

De onderdaan van een derde land kan dit document voorleggen als bewijs van zijn voldoende bestaansmiddelen voor een kort verblijf in België, op voorwaarde dat het eerste deel recto/verso is gedrukt, dat het niet is gewijzigd en dat de bevoegde overheid het heeft aanvaard (zie F).

Dit document moet ook worden voorgelegd binnen een termijn van zes (6) maanden volgend op de datum van, de legalisatie van de handtekening van de garant. Na die termijn zal dit document niet meer worden beschouwd als een bewijs van voldoende bestaansmiddelen van de ten laste genomen onderdaan van een derde land.

*The third-country national being taken care of may produce this document as a proof of sufficient means of subsistence for a short stay in Belgium, provided that the first part is printed on both sides, that it was not modified and that it was accepted by the competent authority (see F).*

*This document must be produced within six (6) months following that of its legalization. After this deadline, it will no longer be considered as a proof of sufficient means of subsistence for the third-country national taken care of.*

**F. Beslissing (in te vullen door de Burgemeester of zijn gemachtigde en de Belgische consulaten) / *Decision (reserved for the Mayor or his/her deputy and for the Belgian Consulates)***

**Krachtens artikel (*invullen*) van het koninklijk besluit van 8 oktober 1981 betreffende de toegang tot het grondgebied, het verblijf, de vestiging en de verwijdering van vreemdelingen:**

- is de verbintenis tot tenlasteneming **AANVAARD**.
  
- is de verbintenis tot tenlasteneming **NIET CONFORM**, omdat:
  - o dit is niet de originele versie;
  - o ze niet volledig ingevuld, gedateerd en ondertekend werd door de garant;
  - o ze niet gelegaliseerd werd door de bevoegde gemeentelijke overheid;
  - o ze buiten de termijn overgelegd wordt ;
  - o ze niet recto verso werd afgedrukt ;
  - o ze werd gewijzigd ;
  - o de volgende documenten niet worden overgelegd :
    - △ een bewijs waaruit de door de garant ontvangen inkomsten blijken of, indien de garant zelfstandige is, een kopie van zijn laatste uittreksel van de belastingen of, indien deze documenten ontbreken, elk ander officieel document waarmee zijn financiële situatie op geldige wijze kan worden aangetoond;
    - △ een kopie van de geldige identiteitskaart of een kopie van de geldige verblijftitel van de garant.

- is de verbintenis tot tenlasteneming **GEWEIGERD** omdat:
  - o ze vals, vervalst of nagemaakt is, of omdat de documenten bedoeld in artikel 17/3, vals, vervalst of nagemaakt zijn:.....
  - o de garant geen Belg is of niet gemachtigd of toegelaten is tot een verblijf van onbepaalde duur:.....
  - o de garant niet over voldoende middelen beschikt:.....

Beslissing genomen op ..... door de Minister of zijn gemachtigde / het Belgisch consulaat in ..... (schrappen wat niet past).

**Akte van kennisgeving.**

Ik, ondergetekende (identiteit en hoedanigheid van de overheid en stempel)....., heb op ..... kennis gegeven van de beslissing. ».

**In accordance with (note the relevant article) of the Royal Decree of 8 October 1981 regarding the access to the territory, the stay, the residence and the removal of foreigners:**

- the formal obligation is **ACCEPTED**.
  
- the formal obligation **DOES NOT COMPLY** because:
  - o this is not the original version;
  - o it is not duly completed, dated and signed by the guarantor;
  - o it is not legalised by the competent municipal authority;
  - o it was produced out of time;
  - o it was not printed on both sides;
  - o It was modified;
  - o the following documents have not been submitted:
    - △ the proof of statements providing evidence of the income earned by the guarantor or, if he/she is self-employed, a copy of his/her most recent tax certificate or, in the absence thereof, any other official document providing evidence of his/her financial situation;
    - △ a copy of the guarantor's identity card or valid residence permit.

- the formal obligation is **REFUSED** because:
  - o it is false, falsified or forged or the documents referred to in Article 17/3 are false, falsified or forged:.....
  - o the guarantor is not Belgian, nor is he authorized or allowed to stay for an unlimited period of time:.....
  - o the guarantor does not have sufficient resources:.....

Decision taken on ..... by the Minister or his/her deputy / the Belgian Consulate at ..... (delete as appropriate).

**Act of notification.**

I, the undersigned (identity / status of the authority and seal)....., notified the decision on ..... ».

**DEEL II – INLICHTINGEN (te bewaren door de garant en de ten laste genomen onderdaan van een derde land / INFORMATION (to be kept by the guarantor and the third country national being care for)**

1. Overeenkomstig artikel 17/5 van het koninklijk besluit van 8 oktober 1981, is de garant wiens verbintenis tot tenlasteneming werd aanvaard hoofdelijk aansprakelijk, samen met de ten laste genomen persoon, voor de betaling van de kosten van het verblijf, de gezondheidszorg en de repatriëring, gedurende een periode van twee jaar, vanaf de dag waarop deze persoon legaal het grondgebied van de lidstaten van de Schengenruimte is binnengekomen.

In voorkomend geval wordt de terugbetaling van deze kosten ingevorderd door de Staat en het bevoegd O.C.M.W., overeenkomstig de artikelen 17/7 tot 17/9 van het koninklijk besluit van 8 oktober 1981.

*In accordance with article 17/5 of the Royal Decree of 8 October 1981, the guarantor whose formal obligation was accepted, together with the foreigner being cared for, is severally liable for paying his/her costs for healthcare, stay and repatriation costs during a period of two years from the day the foreigner legally entered the territory of the Member States of the Schengen area.*

*As the occasion arises, the reimbursement of these costs is claimed by the State and the competent social service department, in accordance with the articles 17/7 to 17/9 of the Royal Decree of 8 October 1981.*

2. De garant kan afstand doen van zijn verbintenis tot tenlasteneming en wordt binnen de grenzen die voorzien worden door artikel 17/6 van zijn verantwoordelijkheid ontheven

*The guarantor can renounce his/her formal obligation and may be exempted from his/her liability within the limits provided for by article 17/6.*

3. De garant werd in kennis gesteld door een informatiebrochure over de verwerking van zijn persoonsgegevens.

*An information leaflet has been made available to the guarantor about the processing of his/her personal data.*

4. De beslissing waarmee de verbintenis tot tenlasteneming onontvankelijk wordt verklaard of geweigerd wordt, is overeenkomstig artikel 39/2, § 2, van de wet van 15 december 1980, vatbaar voor een beroep tot nietigverklaring bij de Raad voor Vreemdelingenbetwistingen, dat bij verzoekschrift binnen de dertig dagen na de kennisgeving van deze beslissing moet worden ingediend. Een vordering tot schorsing kan ingediend worden overeenkomstig artikel 39/82 van de wet van 15 december 1980. Behoudens in het geval van uiterst dringende noodzakelijkheid moeten in één en dezelfde akte zowel de vordering tot schorsing als het beroep tot nietigverklaring worden ingesteld.

Onverminderd andere wettelijke en reglementaire modaliteiten, worden het hierboven bedoelde beroep en de hierboven bedoelde vordering ingediend door middel van een verzoekschrift, dat moet voldoen aan de in artikel 39/78 van de wet van 15 december 1980 en in artikel 32 van het Procedureglement Raad voor Vreemdelingenbetwistingen vermelde vereisten. Zij worden ingediend bij de Raad bij een aangetekend schrijven, onder voorbehoud van de afwijkingen voorzien bij artikel 3, § 1, tweede en vierde lid, van het PR RvV, aan de Eerste Voorzitter van de Raad voor Vreemdelingenbetwistingen, Gaucheretstraat 92-94, te 1030 Brussel.

Onder voorbehoud van de toepassing van artikel 39/79 van de wet van 15 december 1980, schorst het indienen van een beroep tot nietigverklaring en van een vordering tot schorsing de tenuitvoerlegging van onderhavige maatregel niet.

*The decision by means of which the formal obligation is declared inadmissible or is refused, in accordance with article 39/2, § 2, of the law of 15 December 1980, is subject to an appeal for annulment at the Council for Alien Law Litigation, that needs to be introduced by means of an application, within thirty days after the notification of this decision. A claim for suspension can be introduced in accordance with article 39/82 of the law of 15 December 1980. Except in case of extreme urgent necessity both the claim for suspension and the appeal for annulment need to be introduced in a single act.*

*Without prejudice to other legal and regulatory terms, the appeal and the claim mentioned above are introduced by means of an application, that needs to meet the requirements mentioned in article 39/78 of the law of 15 December 1980 and in article 32 of the procedure regulation of the Council for Alien Law Litigation. They are introduced at the Council by means of a registered letter, subject to the derogations provided for by article 3, § 1, subsections 2 and 4, of the procedure regulation of the Council for Alien Law Litigation, to the First President of the Council for Alien Law Litigation, Rue Gaucheret 92-94, 1030 Brussels.*

*Subject to the application of article 39/79 of the law of 15 December 1980, the introduction of an appeal for annulment and of a claim for suspension does not suspend the execution of this measure.*

5. Indien de onderdaan van een derde land die ten laste wordt genomen over een visum moet beschikken voor het beoogd kort verblijf in België en de visumaanvraag bij een Belgische diplomatieke of consulaire post zal worden ingediend wordt de verbintenis tot tenlasteneming, onmiddellijk nadat die gelegaliseerd werd, overhandigd aan de garant. De gelegaliseerde verbintenis tot tenlasteneming en de documenten die vereist zijn om deze verbintenis te staven moeten vervolgens overgelegd worden om de visumaanvraag te staven, en dit binnen een termijn van zes maanden volgend op de legalisatie van de handtekening van de garant, op straffe van onontvankelijk te worden verklaard.

*When the third-country national being cared for must be in possession of a visa for the short stay intended in Belgium and the visa application will be submitted to a Belgian consulate, the formal obligation is provided to the guarantor directly after being legalized. The legalized formal obligation and the accompanying documents must then be produced to support the visa application, within six months following that of its legalization of the signature of the guarantor, on pain of inadmissibility.*

6. Indien de onderdaan van een derde land die ten laste wordt genomen over een visum moet beschikken voor het beoogd kort verblijf in België en de visumaanvraag bij een diplomatieke of consulaire post van een andere Schengenstaat zal worden ingediend moet de verbintenis tot tenlasteneming, indien die aanvaard werd, overgelegd worden om de visumaanvraag te staven, en dit binnen

een termijn van zes maanden volgend op die van de legalisatie van de handtekening van de garant. Indien aan deze verplichting niet voldaan wordt zal de verbintenis tot tenlasteneming geacht worden nooit aanvaard te zijn geweest en zal ze niet in aanmerking worden genomen als bewijs van de vereiste middelen van bestaan

*When the third-country national being cared for must be in possession of a visa for the short stay intended in Belgium and the visa application will be submitted to a consulate of another Schengen Member State, the formal obligation, if accepted, must be produced to support the visa application, within six months following that of the legalization of the signature of the guarantor. If this condition is not met, the formal obligation shall be deemed never to have been accepted and shall not be taken into account as proof of the required means of subsistence*

7. Indien de onderdaan van een derde land die ten laste wordt genomen niet over een visum moet beschikken voor het beoogd kort verblijf in België moet de verbintenis tot tenlasteneming, indien die aanvaard werd, gebruikt worden om binnen de zes maanden volgens op die van de legalisatie van de handtekening van de garant de Schengenruimte binnen te komen. Indien aan deze verplichting niet voldaan wordt zal de verbintenis tot tenlasteneming geacht worden nooit aanvaard te zijn geweest en zal ze niet in aanmerking worden genomen als bewijs van de vereiste middelen van bestaan.

*When the third-country national being cared for does not need to be in possession of a visa for the short stay intended in Belgium, the formal obligation, if accepted, must be used to enter the Schengen area within six months following that of its legalization of the signature of the guarantor. If this condition is not met, the formal obligation shall be deemed never to have been accepted and shall not be taken into account as proof of the required means of subsistence.*

Specimen of Czech Republic's form of providing proof of sponsorship and/or private accommodation

# POZVÁNÍ / LETTER OF INVITATION

Česká republika  
Czech Republic

Převzetí veškerých finančních nákladů souvisejících s pobytem  
Assumption of all financial costs connected with the stay

Převzetí finančních nákladů souvisejících pouze s ubytováním  
Assumption of financial costs connected with accommodation only

CZE1870013

## Zvoucí právnická osoba / Corporation issuing the invitation

Název

Name

Sídlo  
Registered Seat

Ulice  
Street

IC  
Corporate ID number

Čp.  
No.

## Zvoucí fyzická osoba (u právnických osob statutární orgán) Natural person issuing the invitation (statutory body in case of corporations)

Příjmení/Surname

Jméno  
First name(s)

Datum narození  
Date of birth

Místo narození  
Place of birth

Státní příslušnost \*)  
Nationality

Koncovka RC  
Suffix code birth certificate number

Pohlaví \*)  
Sex

Doklad totožnosti číslo  
Identity document No.

Číslo  
Phone No.

### Adresa místa pobytu v ČR / Place of residence in the CR

Místo  
Town

Ulice  
Street

Čp.  
No.

ZVE do České republiky na dobu:  
Invites to the Czech Republic for:

\_\_\_\_\_ dnů od \_\_\_\_\_ do \_\_\_\_\_  
\_\_\_\_\_ days from \_\_\_\_\_ until \_\_\_\_\_

## Zvaná osoba / Invited person

Příjmení/Surname

Jméno  
First name(s)

Datum narození  
Date of birth

Místo narození  
Place of birth

Státní příslušnost \*)  
Nationality

Příbuzenský vztah  
Family relationship

Pohlaví \*)  
Sex

Číslo cestovního dokladu  
Travel document number

Účel cesty \*)  
Purpose of visit

### Adresa místa pobytu na území domovského státu / Place of residence in the home country

Stát bydliště \*)  
Country of residence

Ulice  
Street

Čp.  
No.

Spolucestující děti do 15 let, jsou-li zapsány v cestovním dokladu cizince / Accompanying children under 15 years of age if recorded in the alien's travel document

Pohlaví \*)  
Sex

Datum narození  
Date of birth

Jméno a příjmení / First name(s) and surname

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Adresa ubytování zvané osoby v ČR / Accommodation address of invited person in the CR

Ubytovatel  
Accommodation provider

Místo  
Town

Ulice  
Street

Čp.  
No.

Nájemce  
Renter

Majitel  
Owner

Ubytovací zařízení  
Accommodation facility



**Zvoucí osoba** se zavazuje uhradit podle zákona č. 326/1999 Sb., o pobytu cizinců na území České republiky a o změně některých zákonů, ve znění pozdějších předpisů, náklady spojené s obživou cizince po dobu pobytu na území až do vycestování z území; náklady spojené s ubytováním cizince po dobu pobytu na území až do vycestování z území; náklady spojené s poskytnutím zdravotní péče po dobu pobytu na území, až do vycestování z území, případně též s převozem nemožného nebo ostatků zemřelého; náklady spojené s pobytem zajištěného cizince na území a jeho vycestováním z území.

According to Act No 326/1999 Coll., on the Residence of Aliens in the Territory of the Czech Republic, the person issuing the invitation undertakes to cover the costs connected with the alien's subsistence throughout his/her stay in the Territory until the time the alien departs from the Territory; further the costs connected with the alien's accommodation throughout his/her stay in the Territory until the time the alien departs from the Territory; and the costs connected with the provision of healthcare to the alien throughout his/her stay in the Territory until the time the alien departs the Territory; and, if applicable, also with the transport of the alien if he/she falls ill or with the transport of remains of the deceased alien; and the costs connected with the alien's stay in case he/she is detained in the Territory and his/her subsequent departure from the Territory.

**Zvoucí osoba** se zavazuje uhradit finanční náklady související pouze s ubytováním po dobu pobytu cizince na území až do jeho vycestování. **The person issuing the invitation** undertakes to cover the costs connected only with the accommodation throughout his/her stay in the Territory till his/her departure from the Territory.

**Policí České republiky jsem byl(a) poučen(a) o:**

- době platnosti závazku,
- povinnosti uhradit majetkovou a nemajetkovou újmu, která vznikne státu nedodržením závazků uvedených v pozvání ověřeném policií,
- vymáhání úhrady výše uvedených nákladů vzniklých státu při nesplnění svých závazků v souvislosti s pobytem a vycestováním cizince, nebo pouze s ubytováním,
- právu na informace dle článku 37 odst. 1 Nařízení Evropského parlamentu a Rady (ES) č. 767/2008 o Vizovém informačním systému a o výměně údajů o krátkodobých vizech mezi členskými státy,
- povinnosti v případě odstoupení od tohoto závazku neprodleně o této skutečnosti informovat útvar policie, který pozvání ověřil, od závazku nelze odstoupit v průběhu pobytu cizince na území.

I have been instructed by the Police of the Czech Republic in following items:

- Obligation validity period;
- The obligation to compensate for a financial and non-financial damage the state sustains in the event of failure to meet the obligations contained in the letter of invitation certified by the police;
- Recovery of the abovementioned costs arisen to the state in the event that I breach my obligations in connection with the alien's stay and departure, or only with his/her accommodation;
- The right of information pursuant to Article 37 (1) of Regulation (EC) No. 767/2008 of the European Parliament and the Council concerning the Visa Information System (VIS) and the exchange of data between Member States on short-stay visas;
- A duty to notify the police department that certified the letter of invitation of my withdrawal from the obligation; it is not possible to withdraw therefrom during the alien's stay in the Territory.

**Zvoucí osoba / The person issuing the invitation**

Prohlašuji, že všechny údaje v tiskopisu jsem uvedl(a) správně a úplně a tento závazek přijímám s veškerou odpovědností, svobodně a dobrovolně a jsem si plně vědom(a) právních důsledků v případě jeho nesplnění. Tímto dávám souhlas se zpracováním mých osobních údajů, pořízením kopie mého dokladu totožnosti a jejím založením do spisu.

I hereby declare that all data in this form are true and complete and that I assume the obligation upon my own responsibility and according to my true and free will and that I am fully aware of legal consequences in case of my failure to meet the obligation. I hereby give my consent and authorize processing of my personal data, making a copy of my identity document, and filing thereof in the records.

Místo / Place .....

Datum / Date .....

Podpis / Signature

razítko  
právníka  
osoby  
Corporate  
seal

**Ověřovací doložka policie / Police certification clause**

Ověřuji údaje o zvoucí osobě dle dokladu č./ I hereby certify the data of the person issuing the invitation according to the document No. ....

..... a podpis / and signature

Místo / Place .....

Datum / Date .....

OEČ / PIN (Personal Identification Number) .....

Podpis / Signature .....

razítko  
Stamp

Místo pro potvrzení  
o uhrazení správního poplatku  
Administration fee paid

**Poučení pro držitele pozvání - zvanou osobu / Instruction for invitation holder - invited person**

Držitel tohoto pozvání je povinen / The holder of this letter of invitation is obliged:

- na vyžádání jej předložit při vstupu na území České republiky orgánům policie to present it to police authorities on request on entry into the territory of the Czech Republic
- dodržovat při pobytu na území České republiky právní řád České republiky to respect the legal order of the Czech Republic during his/her stay in the territory of the Czech Republic

**Poučení pro vyplnění formuláře / Instruction for filling in the form**

- tiskopis vyplňujte latinou na psacím stroji či hůlkovým písmem, **ne** červenou barvou fill in the form by Roman alphabet on a typewriter or in block letters, **not** in red
- pro vyplnění údajů - státní příslušnost, pohlaví, stát bydliště a účel cesty - použijte kódovník use code signs for following data - nationality, sex, home country and purpose of visit
- toto pozvání slouží pro žádost o udělení víza České republiky this letter of invitation serves as a supporting document to the application for visa of the Czech Republic

Otisk přechodového razítka příjezd  
Entry stamp

Místo pro úřední záznamy útvarů SCP  
Official records of Alien Police Service

Specimen of Danish's form of providing proof of sponsorship and/or private accommodation

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# Invitation - forretningsvisum

VU1\_da\_150415\_v1.1

## Invitation til ansøgning om forretningsvisum

1. Information om værtsfirmaet		UDFYLDES MED BLOKBOGSTAVER	
Firmanavn		Hjemmeside	
Firmaadresse i Danmark			
Postnummer	By		
Telefonnr.	Telefax		
E-mail			
Branche	CVR-Nr.		

2. Information om værtsfirmaets kontaktperson – dig, der inviterer		UDFYLDES MED BLOKBOGSTAVER	
Fornavn			
Efternavn			
Kontaktadresse hvis anderledes end værtsfirmaets			
Postnummer	By		
Afdeling og funktion	Telefonnr./mobil		
Telefax-nr.	E-mail		

3. Information om visumansøger - personen der skal have visum		UDFYLDES MED BLOKBOGSTAVER	
Fornavn			
Efternavn			
Fødselsdato, dd-mm-åååå	Køn <input type="checkbox"/> Mand <input type="checkbox"/> Kvinde		
Nationalitet			
Adresse i hjemland		Postnummer	
By	Land		
Telefonnr.	E-mail		

4. Information om visumansøgers firma		UDFYLDES MED BLOKBOGSTAVER	
Firmanavn		Hjemmeside	
Firmaadresse		Postnummer	
By		Land	
Branche		Telefonnr.	
Telefax		E-mail	
Hvilken afdeling er ansøger ansat i, og hvad er ansøgers funktion i firmaet?			

5. Information om værtsfirmaets relation til ansøger		UDFYLDES MED BLOKBOGSTAVER	
Har dit firma tidligere haft besøg af ansøger?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> – hvornår og med hvilket formål?			
_____			
_____			
Hvis <b>nej</b> – har dit firma tidligere haft besøg af andre repræsentanter for ansøgers firma?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> – hvornår og med hvilket formål?			
_____			
_____			
Hvor lang tid har forretningsrelationen mellem dit firma og ansøgers firma bestået?			
_____			
Hvordan opstod kontakten mellem dit firma og ansøgers firma?			
_____			
Hvad er det anslåede økonomiske omfang af forretningsforholdet mellem dit firma og ansøgers firma?			
_____			

6. Information om besøget		UDFYLDES MED BLOKBOGSTAVER	
Hvornår skal ansøger ankomme?		Hvor mange dage venter du besøg af ansøger?	
_____		_____	
Hvad er formålet med besøget? – beskriv indholdet af forretningsforholdet, og formålet med besøget			
_____			
Er der særlige omstændigheder eller begivenheder, der skal tages i betragtning ved behandlingen af ansøgningen?			
_____			

### 7. Information om afholdelse af udgifter i forbindelse med besøget

UDFYLDES MED BLOKBOGSTAVER

Hvem betaler for ansøgers rejse?

 Ansøger     Vært

Hvem betaler for ansøgers ophold?

 Ansøger     Vært

Hvor skal ansøger bo under sit ophold?

### 8. Økonomi i forbindelse med rejse og ophold

Vil du som vært indestå økonomisk for ansøger i forbindelse med rejse og ophold i Danmark?

 Ja     Nej
Hvis **ja** – bedes du underskrive her \_\_\_\_\_

### 9. Eventuelle yderligere bemærkninger eller information vedrørende invitationen eller besøget – **vedlæg gerne et udførligt program for besøgets aktiviteter**

UDFYLDES MED BLOKBOGSTAVER

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### 10. Erklæringer og information

#### A. Erklæring på tro og love om, at de oplysninger, jeg har givet, er korrekte

Jeg erklærer på tro og love, at jeg har givet sande oplysninger i dette skema.

Hvis det senere viser sig, at oplysningerne ikke var sande og fuldstændige, kan det have følgende konsekvenser, jf. straffelovens § 161, udlændingelovens § 40 og udlændingelovens §§ 59-60:

- Jeg kan blive straffet med bøde eller fængsel i op til 2 år
- Jeg kan blive dømt til at erstatte de udgifter, som den danske stat har haft på grund af de falske oplysninger

#### B. Information om, at de danske myndigheder har registreret oplysninger om dig og dine forhold

De oplysninger som du giver eller har givet i forbindelse med ansøgningen om visum, vil blive registreret i det danske visumregister (IVR-VIS) og i Schengen-medlemsstaternes fælles visa database (C-VIS). Det samme gælder oplysninger, som du senere giver i forbindelse med en eventuel ansøgning om fortsat ophold i Danmark. Registreringen er obligatorisk.

IVR-VIS er et edb-register, som Udlændingestyrelsen er ansvarlig for. C-VIS er Schengen-medlemsstaternes fælles visa database.

Alle personlige oplysninger om dig, som står på invitationsformularen, vil blive overgivet til de relevante myndigheder i Schengen-medlemsstaterne og vil blive behandlet af disse myndigheder i forbindelse med visumansøgningen. Sådanne oplysninger vil blive indlæst og lagret i visuminformationssystemet (IVR-VIS og C-VIS) i en periode på højst fem år. I løbet af denne periode vil oplysningerne være tilgængelige for de visumudstedende myndigheder og de myndigheder, der udfører visumkontrol ved de ydre grænser og i medlemsstaterne. Endvidere vil medlemsstaternes indvandrings- og asylmyndigheder have adgang til oplysningerne med henblik på at kontrollere, om betingelserne for lovlig indrejse, lovligt ophold og lovlig bopæl på medlemsstaternes område er opfyldt, identificere personer, der ikke eller ikke længere opfylder disse betingelser, behandle en asylansøgning og beslutte, hvem der har ansvaret for en sådan behandling.

Under visse omstændigheder vil oplysningerne desuden blive stillet til rådighed for de udpegede myndigheder i medlemsstaterne og for Europol (den Europæiske Unions politienhed) med henblik på forebyggelse, afsløring og efterforskning af terrorhandlinger og andre alvorlige strafbare handlinger.

Du har ret til at få indsigt i de oplysninger, der registreres om dig i IVR-VIS og i C-VIS og om hvilken medlemsstat, der har oversendt oplysningerne. Henvendelse herom kan ske til Udlændingestyrelsen, Ryesgade 53, 2100 København Ø, e-mail: [visa@us.dk](mailto:visa@us.dk).

Du kan kræve, at oplysninger om dig, der er ukorrekte, bliver berigtiget, og at oplysninger om dig, der er ulovligt behandlet, slettes. Hvis du anmoder om det, vil den myndighed, der behandler visumansøgningen, oplyse dig om, hvordan du kan udøve din ret til at få indsigt i dine personoplysninger og få dem berigtiget eller slettet, herunder om de relevante retsmidler ifølge dansk lov. Den nationale tilsynsmyndighed i Danmark (Datatilsynet) behandler klager vedrørende beskyttelse af personoplysninger. Henvendelse herom kan ske til Datatilsynet, Borgergade 28, 5, DK - 1300 København K, e-mail-adresse: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

#### **C. Information om, at rigtigheden af dine oplysninger kan blive kontrolleret**

Rigtigheden af de oplysninger, som du har givet i dette skema, kan blive kontrolleret af Udlændingestyrelsen. Det kan både ske under selve behandlingen af ansøgningen og senere, når ansøger eventuelt har fået en tilladelse. Ansøgers sag kan blive udtaget til kontrol, selv om der ikke er noget konkret, der tyder på, at dine oplysninger er urigtige.

Kontrollen kan foregå på følgende måder:

- Opslag i registre, fx Det Centrale Personregister
- Henvendelse til andre myndigheder, fx kommuner

Du kan i forbindelse med kontrollen blive bedt om at indsende yderligere oplysninger.

#### **D. Information om konsekvenserne af ophold uden fornøden tilladelse**

Hvis ansøger får udstedt et visum, påhviler det ansøger at udrejse af Schengenområdet i overensstemmelse med det tidsrum, der er angivet i det udstedte visum. Visummet giver ansøger ret til at opholde sig i Schengenlandene i et bestemt antal dage indenfor en nærmere fastsat gyldighedsperiode. Gyldighedsperioden er ofte lidt længere end det antal dage, visummet er gældende for.

Ansøger skal både overholde det fastsatte antal dage og den angivne gyldighedsperiode. Ansøger må altså hverken overskride antallet af dage eller datoerne for ind- og udrejse.

Hvis ansøger udrejser for sent, kan det få alvorlige konsekvenser, og ansøger kan blive pålagt en karensperiode. I karensperioden kan ansøger normalt ikke blive meddelt visum til Danmark. Hvis ansøger overskrider sit visum med højst 30 dage, kan ansøger blive pålagt 3 års karensperiode, mens en overskridelse på mere end 30 dage kan føre til 5 års karensperiode.

#### **E. Information om konsekvenserne af udvisning eller ansøgning om asyl**

Hvis ansøger efter indrejsen på visum udvises administrativt eller ved dom af Danmark, eller hvis ansøger søger om asyl i Danmark eller et andet Schengenland og efterfølgende ikke medvirker til udrejsen, vil ansøger som udgangspunkt ikke kunne få visum i en periode på 5 år.

#### **F. Information om eventuelle konsekvenser, hvis ansøgeren indgiver ansøgning om opholdstilladelse, mens ansøgeren opholder sig i Danmark på visum**

Hvis ansøger indgiver en ansøgning om opholdstilladelse under visumopholdet i Danmark kan det medføre, at ansøger bliver pålagt en karensperiode på 5 år, i hvilken periode ansøger som udgangspunkt vil være afskåret fra at opnå visum til Danmark.

Der vil dog ikke blive pålagt karens, hvis ansøgningen vedrører følgende typer af opholdstilladelse:

- familiesammenføring iht. udlændingelovens § 9, stk. 1, nr. 1 eller 2, eller § 9 c, stk. 1;
- studietilladelse iht. udlændingelovens § 9 c, stk. 1;
- opholdstilladelse på grundlag af fribyordningen, jf. udlændingelovens § 9 c, stk. 4;



arbejdstilladelse iht. udlændingelovens § 9 a, stk. 2. nr. 1-4 eller 6.

Endvidere vil opholdsansøgningen ikke medføre karens, hvis hensyn af humanitær karakter taler afgørende derimod.

**Bemærk:**

Hvis ansøger søger om en opholdstilladelse omfattet af ovenstående undtagelser, vil ansøger alligevel blive pålagt karens, hvis det afgørende formål er at forlænge opholdet her i landet, og det er åbenbart, at ansøgningen ikke vil kunne imødekommes.

## 11. Underskrift

**Jeg bekræfter ved min underskrift at have læst, forstået og accepteret indholdet af pkt. 10**

Dato og sted

Underskrift





## Invitation

VU2\_da\_150415\_v1.1

## Invitation til brug for ansøgning om visum

1. Information om værten - dig, der inviterer		UDFYLDES MED BLOKBOGSTAVER
Fornavn		
Efternavn		
Bopælsadresse i Danmark		Postnummer
By	Nationalitet	
Civilstand		
Telefonnr. / mobil	E-mail	
CPR-nr.	Evt. udlændingenummer eller udlændinge-ID	

2. Information om visumansøger – personen, der skal have visum		UDFYLDES MED BLOKBOGSTAVER
Fornavn		
Efternavn		
Fødselsdato, dd-mm-åååå	Køn <input type="checkbox"/> Mand <input type="checkbox"/> Kvinde	
Nationalitet	Civilstand	
Adresse i hjemland		Postnummer
By	Land	
Telefonnr. / mobil	E-mail	
Skal ansøger bo hos dig (værten) under sit ophold? <input type="checkbox"/> Ja <input type="checkbox"/> Nej		
Hvis <b>nej</b> – hvor skal ansøger bo under opholdet?		
Adresse		
Postnummer	By	

**3. Information om din relation til ansøger**

UDFYLDES MED BLOKBOGSTAVER

**Vedlæg gerne eventuel dokumentation for din relation til ansøger i kopi.**

Er du i familie med ansøger?

 Ja  NejHvis **ja** – hvad er din familierelation til ansøger?Hvis **nej** – beskriv din relation til ansøgerHvis ansøger er din **kæreste/forlovede** – oplys følgende

Har du mødt ansøger personligt?

 Ja  NejHvis **ja** – hvor (land) og hvornår har du sidst mødt ansøger? Vedlæg gerne dokumentation for dette.**4. Information om besøget**

UDFYLDES MED BLOKBOGSTAVER

Hvornår skal ansøger ankomme?

Hvor mange dage venter du besøg af ansøger?

Hvad er formålet med besøget?

Er der særlige omstændigheder eller begivenheder, der skal tages i betragtning ved behandlingen af ansøgningen?

Er der nogen, som skal følge ansøger til Danmark?

**5. Information om afholdelse af udgifter i forbindelse med besøget**

Hvem betaler for ansøgers rejse?

 Ansøger  Vært

Hvem betaler for ansøgers ophold?

 Ansøger  Vært**6. Økonomi i forbindelse med rejse og ophold**

Vil du som vært indestå økonomisk for ansøger i forbindelse med rejse og ophold i Danmark?

 Ja  NejHvis **ja** – bedes du underskrive her \_\_\_\_\_



hvordan du kan udøve din ret til at få indsigt i dine personoplysninger og få dem berigtiget eller slettet, herunder om de relevante retsmidler ifølge dansk lov. Den nationale tilsynsmyndighed i Danmark (Datatilsynet) behandler klager vedrørende beskyttelse af personoplysninger. Henvendelse herom kan ske til Datatilsynet, Borgergade 28, 5, DK - 1300 København K, e- mail-adresse: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

### C. Information om, at rigtigheden af dine oplysninger kan blive kontrolleret

Rigtigheden af de oplysninger, som du har givet i dette skema, kan blive kontrolleret af Udlændingestyrelsen. Det kan både ske under selve behandlingen af ansøgningen og senere, når ansøger eventuelt har fået en tilladelse. Ansøgers sag kan blive udtaget til kontrol, selv om der ikke er noget konkret, der tyder på, at dine oplysninger er urigtige.

Kontrollen kan foregå på følgende måder:

- Opslag i registre, fx Det Centrale Personregister
- Henvendelse til andre myndigheder, fx kommuner

Du kan i forbindelse med kontrollen blive bedt om at indsende yderligere oplysninger.

### D. Information om konsekvenserne af ophold uden fornøden tilladelse

Hvis ansøger får udstedt et visum, påhviler det ansøger at udrejse af Schengenområdet i overensstemmelse med det tidsrum, der er angivet i det udstedte visum. Visummet giver ansøger ret til at opholde sig i Schengenlandene i et bestemt antal dage indenfor en nærmere fastsat gyldighedsperiode. Gyldighedsperioden er ofte lidt længere end det antal dage, visummet er gældende for.

Ansøger skal både overholde det fastsatte antal dage og den angivne gyldighedsperiode. Ansøger må altså hverken overskride antallet af dage eller datoerne for ind- og udrejse.

Hvis ansøger udrejser for sent, kan det få alvorlige konsekvenser, og ansøger kan blive pålagt en karensperiode. I karensperioden kan ansøger normalt ikke blive meddelt visum til Danmark. Hvis ansøger overskrider sit visum med højst 30 dage, kan ansøger blive pålagt 3 års karensperiode, mens en overskridelse på mere end 30 dage kan føre til 5 års karensperiode.

### E. Information om konsekvenserne af udvisning eller ansøgning om asyl

Hvis ansøger efter indrejsen på visum udvises administrativt eller ved dom af Danmark, eller hvis ansøger søger om asyl i Danmark eller et andet Schengenland og efterfølgende ikke medvirker til udrejsen, vil ansøger som udgangspunkt ikke kunne få visum i en periode på 5 år.

### F. Information om eventuelle konsekvenser, hvis ansøgeren indgiver ansøgning om opholdstilladelse, mens ansøgeren opholder sig i Danmark på visum

Hvis ansøger indgiver en ansøgning om opholdstilladelse under visumopholdet i Danmark kan det medføre, at ansøger bliver pålagt en karensperiode på 5 år, i hvilken periode ansøger som udgangspunkt vil være afskåret fra at opnå visum til Danmark.

Der vil dog ikke blive pålagt karens, hvis ansøgningen vedrører følgende typer af opholdstilladelse:

- familiesammenføring iht. udlændingelovens § 9, stk. 1, nr. 1 eller 2, eller § 9 c, stk. 1;
- studietilladelse iht. udlændingelovens § 9 c, stk. 1;
- opholdstilladelse på grundlag af fribyordningen, jf. udlændingelovens § 9 c, stk. 4; arbejdstilladelse iht. udlændingelovens § 9 a, stk. 2, nr. 1-4 eller 6.

Endvidere vil opholdsansøgningen ikke medføre karens, hvis hensyn af humanitær karakter taler afgørende derimod.

### Bemærk:

Hvis ansøger søger om en opholdstilladelse omfattet af ovenstående undtagelser, vil ansøger alligevel blive pålagt karens, hvis det afgørende formål er at forlænge opholdet her i landet, og det er åbenbart, at ansøgningen ikke vil kunne imødekommes.

## 9. Underskrift

**Jeg bekræfter ved min underskrift at have læst, forstået og accepteret indholdet af pkt. 8**

Dato og sted

Underskrift



# Visuminvitation

VU3\_da\_150415\_v1.0

## Invitation til ansøgning om visum til kulturelt arrangement, undervisning, kursus, sportsarrangement el.lign.

1. Oplysninger om værten (foreningen/organisationen/institutionen) i Danmark	
UDFYLDES MED BLOKBOGSTAVER	
Foreningen/organisationen/institutionens navn	Evt. CVR-nummer
Adresse	
Postnummer	By
Hvad er foreningen/organisationens/institutionens formål?	Hjemmeside
Telefonnr.	E-mail-adresse

2. Oplysninger om kontaktperson for værten – dig, der inviterer	
UDFYLDES MED BLOKBOGSTAVER	
Fornavn(e)	
Efternavn	CPR-nummer
Telefonnr./mobil	E-mail-adresse
Kontaktadresse, hvis anderledes end foreningens/organisationens/institutionens adresse	
Kontaktpersonens afdeling og funktion	

3. Oplysninger om visumansøger – personen, der søger om visum	
UDFYLDES MED BLOKBOGSTAVER	
Fornavn(e)	
Efternavn	
Fødselsdato (dd-mm-åååå)	Køn <input type="checkbox"/> Mand <input type="checkbox"/> Kvinde
Nationalitet	
Adresse i hjemland	Postnummer
By	Land
Telefonnr.	E-mail-adresse

4. Oplysninger om visumansøgers forening/institution/organisation i hjemlandet		UDFYLDES MED BLOKBOGSTAVER
Hvilken forening/institution/organisation er ansøger tilknyttet i hjemlandet?		
Adresse		Postnummer
By	Land	
Telefonnr.	E-mail-adresse	
Hjemmeside		

5. Oplysninger om relationen mellem visumansøger og værtsforening/-institution/-organisation i Danmark		UDFYLDES MED BLOKBOGSTAVER
Hvordan er kontakten mellem din forening/organisation/institution og visumansøger etableret?		
Hvordan opstod kontakten mellem dig/din forening/institution/organisation og ansøger/ansøgers organisation/institution/organisation?		
Hvem er jeres kontaktperson i ansøgerens hjemland?		
Hvilken forening/institution/organisation er kontaktpersonen tilknyttet?		
Hvad er kontaktpersonens stilling/funktion?		
Beskriv ansøgers baggrund og/eller kvalifikationer for at deltage i arrangementet i Danmark		

6. Oplysninger om tidspunkt for og formål med besøget		UDFYLDES MED BLOKBOGSTAVER
Hvornår skal ansøger ankomme?	Hvor mange dage venter du besøg?	
Hvor mange gange skal ansøger kunne indrejse?		
Hvad er formålet med besøget? – beskriv arrangementet/karakteren af opholdet		
Er der særlige omstændigheder eller begivenheder, der skal tages i betragtning ved behandlingen af ansøgningen?		

7. Oplysninger om afholdelse af udgifter i forbindelse med besøget		UDFYLDES MED BLOKBOGSTAVER
Hvem betaler for ansøgers rejse?		
<input type="checkbox"/> Ansøger <input type="checkbox"/> Vært <input type="checkbox"/> Anden		
Hvem betaler for ansøgers ophold?		
<input type="checkbox"/> Ansøger <input type="checkbox"/> Vært <input type="checkbox"/> Anden		
Hvor skal ansøger bo under sit ophold?		



medlemsstaterne og for Europol (den Europæiske Unions politienhed) med henblik på forebyggelse, afsløring og efterforskning af terrorhandlinger og andre alvorlige strafbare handlinger.

Du har ret til at få indsigt i de oplysninger, der registreres om dig i IVR-VIS og i C-VIS og om hvilken medlemsstat, der har oversendt oplysningerne. Henvendelse herom kan ske til Udlændingestyrelsen, Rymsgade 53, 2100 København Ø, e-mail: [visa@us.dk](mailto:visa@us.dk).

Du kan kræve, at oplysninger om dig, der er ukorrekte, bliver berigtiget, og at oplysninger om dig, der er ulovligt behandlet, slettes. Hvis du anmoder om det, vil den myndighed, der behandler visumansøgningen, oplyse dig om, hvordan du kan udøve din ret til at få indsigt i dine personoplysninger og få dem berigtiget eller slettet, herunder om de relevante retsmidler ifølge dansk lov. Den nationale tilsynsmyndighed i Danmark (Datatilsynet) behandler klager vedrørende beskyttelse af personoplysninger. Henvendelse herom kan ske til Datatilsynet, Borgergade 28, 5, DK - 1300 København K, e-mail-adresse: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

### **C. Information om, at rigtigheden af dine oplysninger kan blive kontrolleret**

Rigtigheden af de oplysninger, som du har givet i dette skema, kan blive kontrolleret af Udlændingestyrelsen. Det kan både ske under selve behandlingen af ansøgningen og senere, når ansøger eventuelt har fået en tilladelse. Ansøgers sag kan blive udtaget til kontrol, selv om der ikke er noget konkret, der tyder på, at dine oplysninger er urigtige.

Kontrollen kan foregå på følgende måder:

- Opslag i registre, fx Det Centrale Personregister
- Henvendelse til andre myndigheder, fx kommuner

Du kan i forbindelse med kontrollen blive bedt om at indsende yderligere oplysninger.

### **D. Information om konsekvenserne af ophold uden fornøden tilladelse**

Hvis ansøger får udstedt et visum, påhviler det ansøger at udrejse af Schengenområdet i overensstemmelse med det tidsrum, der er angivet i det udstedte visum. Visummet giver ansøger ret til at opholde sig i Schengenlandene i et bestemt antal dage indenfor en nærmere fastsat gyldighedsperiode. Gyldighedsperioden er ofte lidt længere end det antal dage, visummet er gældende for.

Ansøger skal både overholde det fastsatte antal dage og den angivne gyldighedsperiode. Ansøger må altså hverken overskride antallet af dage eller datoerne for ind- og udrejse.

Hvis ansøger udrejser for sent, kan det få alvorlige konsekvenser, og ansøger kan blive pålagt en karenperiode. I karenperioden kan ansøger normalt ikke blive meddelt visum til Danmark. Hvis ansøger overskrider sit visum med højst 30 dage, kan ansøger blive pålagt 3 års karenperiode, mens en overskridelse på mere end 30 dage kan føre til 5 års karenperiode.

### **E. Information om konsekvenserne af udvisning eller ansøgning om asyl**

Hvis ansøger efter indrejsen på visum udvises administrativt eller ved dom af Danmark, eller hvis ansøger søger om asyl i Danmark eller et andet Schengenland og efterfølgende ikke medvirker til udrejsen, vil ansøger som udgangspunkt ikke kunne få visum i en periode på 5 år.

### **F. Information om eventuelle konsekvenser, hvis ansøgeren indgiver ansøgning om opholdstilladelse, mens ansøgeren opholder sig i Danmark på visum**

Hvis ansøger indgiver en ansøgning om opholdstilladelse under visumopholdet i Danmark kan det medføre, at ansøger bliver pålagt en karenperiode på 5 år, i hvilken periode ansøger som udgangspunkt vil være afskåret fra at opnå visum til Danmark.

Der vil dog ikke blive pålagt karen, hvis ansøgningen vedrører følgende typer af opholdstilladelse:

- familiesammenføring iht. udlændingelovens § 9, stk. 1, nr. 1 eller 2, eller § 9 c, stk. 1;
- studietilladelse iht. udlændingelovens § 9 c, stk. 1;
- opholdstilladelse på grundlag af fribyordningen, jf. udlændingelovens § 9 c, stk. 4;
- arbejdstilladelse iht. udlændingelovens § 9 a, stk. 2, nr. 1-4 eller 6.

Endvidere vil opholdsansøgningen ikke medføre karen, hvis hensyn af humanitær karakter taler afgørende derimod.

### **Bemærk:**

Hvis ansøger søger om en opholdstilladelse omfattet af ovenstående undtagelser, vil ansøger alligevel blive pålagt karen, hvis det afgørende formål er at forlænge opholdet her i landet, og det er åbenbart, at ansøgningen ikke vil kunne imødekommes.



<b>11. Underskrift</b>	
<b>Jeg bekræfter ved min underskrift at have læst, forstået og accepteret indholdet af pkt. 10</b>	
Dato og sted	Underskrift





# Visuminvitation - sømandsvisum

VU4\_da\_150415\_v1.0

## Invitation til ansøgning om visum til sømænd

1. Oplysninger om værtsfirmaet		UDFYLDES MED BLOKBOGSTAVER
Firmanavn	CVR-nummer	
Adresse i Danmark		
Postnummer	By	
Branche	Hjemmeside	
Telefonnr.	Telefax	E-mail-adresse

2. Oplysninger om værtsfirmaets kontaktperson - dig, der inviterer		UDFYLDES MED BLOKBOGSTAVER
Fornavn(e)		
Efternavn		
Kontaktadresse, hvis anderledes end værtsfirmaets adresse		
Telefonnr./mobil	Telefax	E-mail-adresse
Afdeling og funktion		

3. Oplysninger om visumansøger - sømanden der søger om visum		UDFYLDES MED BLOKBOGSTAVER
Fornavn(e)		
Efternavn		
Fødselsdato (dd-mm-åååå)	Køn <input type="checkbox"/> Mand <input type="checkbox"/> Kvinde	
Nationalitet		
Adresse i hjemland		Postnummer
By	Land	
Telefonnr.	E-mail-adresse	

4. Oplysninger om bureau/agency el.lign. der formidler sømanden		UDFYLDES MED BLOKBOGSTAVER	
Er sømanden tilknyttet et firma i hjemlandet (agency/bureau el.lign.)?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> , bedes du oplyse følgende:			
Firmanavn			
Adresse		Postnummer	
By		Land	
Telefonnr.	Telefax	E-mail	
Hjemmeside		Branche	

5. Oplysninger om sømanden og sømandens beskæftigelse		UDFYLDES MED BLOKBOGSTAVER	
Har sømanden en sømandsbog?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> , bedes du oplyse følgende:			
Sømandsbog nummer: _____		Sømandsbog udstedt af (land): _____	
Hvor længe er sømandens kontrakt gyldig?			
Hvor mange dage ønskes visum?		Er sømanden dækket af en sygeforsikring?	
		<input type="checkbox"/> Ja <input type="checkbox"/> Nej	
Har I tidligere haft besøg af sømanden?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> , i hvilket tidsrum var den <u>seneste</u> kontrakt gyldig?			
Har sømanden tidligere haft et Schengenvisum?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> , hvornår var <u>seneste</u> Schengenvisum gyldigt?			
Hvad er navnet på skibet, som sømanden skal påmønstre?			
Hvor skal sømanden påmønstre?		Hvad er den forventede dato for påmønstring?	
Hvor forventes afmønstringen at finde sted?		Hvad er den forventede dato for afmønstring?	
Hvad er sømandens opgave (specielt ved krydstogtskibe)?			
Vil du som vært garantere økonomisk for sømanden i forbindelse med rejse og ophold?			
<input type="checkbox"/> Ja <input type="checkbox"/> Nej			
Hvis <b>ja</b> , bedes du underskrive her _____ (Pkt. 8. skal underskrives af samme person)			

## 6. Eventuelle bemærkninger til invitationen – herunder særlige forhold, som visummyndighederne skal tage højde for

UDFYLDES MED BLOKBOGSTAVER

## 7. Erklæringer

### A. Erklæring på tro og love om, at de oplysninger, jeg har givet, er korrekte

Jeg erklærer på tro og love, at jeg har givet sande oplysninger i dette skema.

Hvis det senere viser sig, at oplysningerne ikke var sande og fuldstændige, kan det have følgende konsekvenser, jf. straffelovens § 161, udlændingelovens § 40 og udlændingelovens §§ 59-60:

- Jeg kan blive straffet med bøde eller fængsel i op til 2 år
- Jeg kan blive dømt til at erstatte de udgifter, som den danske stat har haft på grund af de falske oplysninger

### B. Information om, at de danske myndigheder har registreret oplysninger om dig og dine forhold

De oplysninger som du giver eller har givet i forbindelse med ansøgningen om visum, vil blive registreret i det danske visumregister (IVR-VIS) og i Schengen-medlemsstaternes fælles visa database (C-VIS). Det samme gælder oplysninger, som du senere giver i forbindelse med en eventuel ansøgning om fortsat ophold i Danmark. Registreringen er obligatorisk.

IVR-VIS er et edb-register, som Udlændingestyrelsen er ansvarlig for. C-VIS er Schengen-medlemsstaternes fælles visa database.

Alle personlige oplysninger om dig, som står på invitationsformularen, vil blive overgivet til de relevante myndigheder i Schengen-medlemsstaterne og vil blive behandlet af disse myndigheder i forbindelse med visumansøgningen. Sådanne oplysninger vil blive indlæst og lagret i visuminformationssystemet (IVR-VIS og C-VIS) i en periode på højst fem år. I løbet af denne periode vil oplysningerne være tilgængelige for de visumudstedende myndigheder og de myndigheder, der udfører visumkontrol ved de ydre grænser og i medlemsstaterne. Endvidere vil medlemsstaternes indvandrings- og asylmyndigheder have adgang til oplysningerne med henblik på at kontrollere, om betingelserne for lovlig indrejse, lovligt ophold og lovlig bopæl på medlemsstaternes område er opfyldt, identificere personer, der ikke eller ikke længere opfylder disse betingelser, behandle en asylansøgning og beslutte, hvem der har ansvaret for en sådan behandling.

Under visse omstændigheder vil oplysningerne desuden blive stillet til rådighed for de udpegede myndigheder i medlemsstaterne og for Europol (den Europæiske Unions politienhed) med henblik på forebyggelse, afsløring og efterforskning af terrorhandlinger og andre alvorlige strafbare handlinger.

Du har ret til at få indsigt i de oplysninger, der registreres om dig i IVR-VIS og i C-VIS og om hvilken medlemsstat, der har oversendt oplysningerne. Henvendelse herom kan ske til Udlændingestyrelsen, Ryesgade 53, 2100 København Ø, e-mail: [visa@us.dk](mailto:visa@us.dk).

Du kan kræve, at oplysninger om dig, der er ukorrekte, bliver berigtiget, og at oplysninger om dig, der er ulovligt behandlet, slettes. Hvis du anmoder om det, vil den myndighed, der behandler visumansøgningen, oplyse dig om, hvordan du kan udøve din ret til at få indsigt i dine personoplysninger og få dem berigtiget eller slettet, herunder om de relevante retsmidler ifølge dansk lov. Den nationale tilsynsmyndighed i Danmark (Datatilsynet) behandler klager vedrørende beskyttelse af personoplysninger. Henvendelse herom kan ske til Datatilsynet, Borgergade 28, 5, DK - 1300 København K, e-mail-adresse: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

### C. Information om, at rigtigheden af dine oplysninger kan blive kontrolleret

Rigtigheden af de oplysninger, som du har givet i dette skema, kan blive kontrolleret af Udlændingestyrelsen. Det kan både ske under selve behandlingen af ansøgningen og senere, når ansøger eventuelt har fået en tilladelse. Ansøgers sag kan blive udtaget til kontrol, selv om der ikke er noget konkret, der tyder på, at dine oplysninger er urigtige.

Kontrollen kan foregå på følgende måder:

- Opslag i registre, fx Det Centrale Personregister
- Henvendelse til andre myndigheder, fx kommuner

Du kan i forbindelse med kontrollen blive bedt om at indsende yderligere oplysninger.

#### **D. Information om konsekvenserne af ophold uden fornøden tilladelse**

Hvis ansøger får udstedt et visum, påhviler det ansøger at udrejse af Schengenområdet i overensstemmelse med det tidsrum, der er angivet i det udstedte visum. Visummet giver ansøger ret til at opholde sig i Schengenlandene i et bestemt antal dage indenfor en nærmere fastsat gyldighedsperiode. Gyldighedsperioden er ofte lidt længere end det antal dage, visummet er gældende for.

Ansøger skal både overholde det fastsatte antal dage og den angivne gyldighedsperiode. Ansøger må altså hverken overskride antallet af dage eller datoerne for ind- og udrejse.

Hvis ansøger udrejser for sent, kan det få alvorlige konsekvenser, og ansøger kan blive pålagt en karensperiode. I karensperioden kan ansøger normalt ikke blive meddelt visum til Danmark. Hvis ansøger overskrider sit visum med højst 30 dage, kan ansøger blive pålagt 3 års karensperiode, mens en overskridelse på mere end 30 dage kan føre til 5 års karensperiode.

#### **E. Information om konsekvenserne af udvisning eller ansøgning om asyl**

Hvis ansøger efter indrejsen på visum udvises administrativt eller ved dom af Danmark, eller hvis ansøger søger om asyl i Danmark eller et andet Schengenland og efterfølgende ikke medvirker til udrejsen, vil ansøger som udgangspunkt ikke kunne få visum i en periode på 5 år.

#### **F. Information om eventuelle konsekvenser, hvis ansøgeren indgiver ansøgning om opholdstilladelse, mens ansøgeren opholder sig i Danmark på visum**

Hvis ansøger indgiver en ansøgning om opholdstilladelse under visumopholdet i Danmark kan det medføre, at ansøger bliver pålagt en karensperiode på 5 år, i hvilken periode ansøger som udgangspunkt vil være afskåret fra at opnå visum til Danmark.

Der vil dog ikke blive pålagt karens, hvis ansøgningen vedrører følgende typer af opholdstilladelse:

- familiesammenføring iht. udlændingelovens § 9, stk. 1, nr. 1 eller 2, eller § 9 c, stk. 1;
- studietilladelse iht. udlændingelovens § 9 c, stk. 1;
- opholdstilladelse på grundlag af fribyordningen, jf. udlændingelovens § 9 c, stk. 4;
- arbejdstilladelse iht. udlændingelovens § 9 a, stk. 2. nr. 1-4 eller 6.

Endvidere vil opholdsansøgningen ikke medføre karens, hvis hensyn af humanitær karakter taler afgørende derimod.

#### **Bemærk:**

Hvis ansøger søger om en opholdstilladelse omfattet af ovenstående undtagelser, vil ansøger alligevel blive pålagt karens, hvis det afgørende formål er at forlænge opholdet her i landet, og det er åbenbart, at ansøgningen ikke vil kunne imødekommes.

## 8. Underskrift

**Jeg bekræfter ved min underskrift at have læst, forstået og accepteret indholdet af pkt. 7**

Dato og sted

Underskrift

# VU1



UDLÆNDINGESTYRELSEN  
DANISH IMMIGRATION SERVICE

## Invitation - business

VU1\_en\_150415\_v1.1

### Invitation form for business visa applications

1. Information concerning the inviting company		PLEASE COMPLETE IN CAPITAL LETTERS
Company name	Homepage	
Company address in Denmark		
Zip code	City	
Telephone no.	Fax-no.	
E-mail		
Field of business	CVR-No.	

2. Information concerning the host company's contact person – the inviting party		PLEASE COMPLETE IN CAPITAL LETTERS
First name		
Surname		
Contact address if different from company address		
Zip code	City	
Branch and position	Telephone no./mobile	
Fax-no.	E-mail	

3. Information concerning the visa applicant – the person requiring the visa		PLEASE COMPLETE IN CAPITAL LETTERS
First name		
Surname		
Date of birth, dd-mm-yyyy	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Nationality		
Address in home country	Zip code	
City	Country	
Telephone no.	E-mail	



4. Information concerning the applicant's company		PLEASE COMPLETE IN CAPITAL LETTERS
Company name	Homepage	
Company address	Zip code	
City	Country	
Field of business	Telephone no.	
Fax-no.	E-mail	
In which branch of the company is the applicant employed and in which capability?		

5. Information concerning your company's relation to the applicant or company employing the applicant		PLEASE COMPLETE IN CAPITAL LETTERS
Has your company previously been visited by the applicant?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
If <b>yes</b> – when and with what purpose?		
_____		
_____		
If <b>no</b> – has your company previously been visited by other representatives of the applicant's company?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
If <b>yes</b> – when and with what purpose?		
_____		
_____		
How long has your company had business relations with the applicants company?		
_____		
How was the business relation between your company and the applicant's company established?		
_____		
What is the estimated financial extent of the business relation between your company and the applicant's company?		
_____		

6. Information concerning the upcoming visit		PLEASE COMPLETE IN CAPITAL LETTERS
When is the applicant to arrive?	How many days are you expecting the applicant?	
_____		
What is the purpose of the visit? – describe the business relation and the purpose of this specific visit		
_____		
Are there any special circumstances to be taken into account concerning the visit?		
_____		



## 10. Declarations and information

### A. Sworn declaration of correctness

I hereby confirm that the information I have given in this form is correct.

If the information is found to be false, I am subject to the following penalties cf. the Danish Criminal Code section 161, the Aliens Act section 40 and section 59-60:

- Fine or imprisonment of up to 2 years.
- Reimbursing any expenses incurred by the Danish state as a consequence of the false information.

### B. Notification that the Danish authorities have registered information about you and your affairs

The information you supply or have supplied in connection with the application for a visa will be entered into, and stored in the Visa Information System (IVR-VIS and C-VIS) This also applies to information you may give in conjunction with an application to extend the applicant's stay. The registration is mandatory.

IVR-VIS is a computerised register maintained by the Danish Immigration Service. C-VIS is a computerised central visa register for the Schengen member states.

Any personal data concerning you which appear on the invitation form will be supplied to the relevant authorities of the Schengen Member States and processed by these authorities, for the purpose of a decision on the visa application. Such data will be entered into, and stored in the Visa Information System (IVR-VIS and C-VIS) for a maximum period of 5 years. During this period of time, 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. Furthermore, immigration and asylum authorities in the Member States will have access to the data for the purpose 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 the conditions, of examining an asylum application and on determining responsibility for such examination.

Under certain conditions the data will also be available to designated authorities of the Member States and to Europol (European Union's law enforcement agency) for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. You are entitled to right of access to the information registered about you in IVR-VIS and C-VIS and of the Member State which transmitted the data. Inquiries about this can be addressed to the Danish Immigration Service, Ryesgade 53, DK-2100 Copenhagen Ø, e-mail: [visa@us.dk](mailto:visa@us.dk).

You can request that data relating to you which are inaccurate be corrected and that data processed unlawfully be deleted. On your request, the authority examining the visa application will inform you of the manner in which you may exercise your right to check the personal data concerning you and have them corrected or deleted, including the related remedies according to Danish nation Law. The national supervisory authority in Denmark (the Danish Data Protection Agency) will consider claims concerning the protection of personal data. Inquiries about this can be addressed to the Danish Data Protection Agency, Borgergade 28, 5, DK-1300 Copenhagen K, e-mail: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

### C. Information regarding possible verification by the authorities of the information you have supplied

The Danish Immigration Service may seek to verify the accuracy of the information you have given in this form. This may happen while the application is being reviewed or after the applicant has been granted a visa. Verification may be conducted at random and is not necessarily an indication that the Danish Immigration Service suspects you of providing false information.

Verification may involve the following:

- Checking public registers, such as the Central Person Register
- Contacting other authorities, such as municipalities

You may be asked to supply additional information as part of the verification process.

### D. Information about the consequences connected to the applicants illegal stay in Denmark or another Schengen country

If the applicant is issued a visa, the applicant shall leave the Schengen region within the validity of the visa. The visa gives the holder the right to reside in the Schengen region for a predetermined number of days within a further defined period of validity. The period of validity is often longer than the number of days the visa is issued for.

The applicant may neither reside in the Schengen region for more than the permitted number of days, nor arrive or depart outside of the validity period.

If the applicant stays in Denmark or the Schengen region beyond the validity of the visa it may have serious consequences and the applicant may be given a penalty period. During this period the applicant will normally be unable to obtain a Schengen visa to enter Denmark. If the applicant exceeds the visa period by up to 30 days the applicant may be banned for 3 years, and if the applicant exceeds the visa period by more than 30 days a 5 year ban may be imposed.

**E. Consequences if the applicant is expelled from Denmark or applies for asylum in Denmark or another Schengen country**

If the applicant upon entering Denmark on a visa is expelled either by administrative decision or by court order, or if the applicant applies for asylum in Denmark or another Schengen country and does not leave voluntarily after the final rejection, the applicant will not be eligible for obtaining a new visa for a period of 5 years.

**F. Information about possible consequences if the applicant applies for a residence permit while in Denmark on a visa (short term)**

If the applicant is staying in Denmark on a visa (short term) and submits an application for a residence permit in this country, you need to be aware that the applicant can become ineligible for a visa for 5 years.

However, the abovementioned consequence does not apply in the following cases:

- Application for family reunification according to the Aliens Act section 9(1) (i) or (ii), or section 9 c(1).
- Application for a residence permit in order to study according to the Aliens Act section 9 c(1).
- Application for a residence permit in order to participate in the cities of refuge program according to the Aliens Act section 9 c(4).
- Application for a residence permit in order to work according to the Aliens Act section 9 a(2) (i-iv) or (vi).

Moreover, if there are decisive humanitarian reasons for allowing the applicant to remain eligible for a visa the abovementioned consequence will not apply.

**Please note:**

If the main purpose of the application for a residence permit is for the applicant to be allowed to remain in Denmark while the case is being processed, although it is evident that a residence permit cannot be granted, the applicant will become ineligible for a visa even though the kind of residence permit in question is included in the list above.

**11. Signature**

**By signing below, I confirm that I have read, understood and accepted the terms laid out in section 10.**

Date and place

Signature



VU2


 UDLÆNDINGESTYRELSEN  
 DANISH IMMIGRATION SERVICE

# Invitation

VU2\_en\_150415\_v1.1

## Invitation form for visa applications

1. Information concerning the host – you, the inviting party		PLEASE COMPLETE IN CAPITAL LETTERS
First name		
Surname		
Address in Denmark		
Zip code	City	
Nationality	Marital status	
Telephone no. / mobile	E-mail	
CPR-nr. (social security no.)	Alien no. or Alien-ID if applicable	

2. Information concerning the visa applicant – the person requiring the visa		PLEASE COMPLETE IN CAPITAL LETTERS
First name		
Surname		
Date of birth, dd-mm-yyyy	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Nationality	Marital status	
Address in home country	Zip code	
City	Country	
Telephone no.	E-mail	
Will the applicant be staying at your (the host's) residence? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If <b>no</b> – where will the applicant be staying?		
Address		
Zip code	City	



**3. Information concerning your relation to the applicant PLEASE COMPLETE IN CAPITAL LETTERS**

**Please attach a copy of any documentation for the relation**

Are you related by family to the applicant?

Yes       No

If **yes** - in which way?

\_\_\_\_\_

If **no** - describe your relationship with the applicant

\_\_\_\_\_

If the applicant is your **girl-/boyfriend or fiancé** - please answer the following questions

Have you met the applicant in person?

Yes       No

If **yes** - where (country) and when did you last meet the applicant? Please enclose documentation.

**4. Information concerning the upcoming visit PLEASE COMPLETE IN CAPITAL LETTERS**

When is the applicant to arrive?

How many days are you expecting the applicant?

What is the purpose of the visit?

Are there any special circumstances to be taken into account concerning the visit?

Is anyone accompanying the applicant to Denmark?

**5. Information concerning the payment of costs in relation to the visit**

Who is paying for the applicant's travel expenses?

Applicant       Host

Who is financially responsible for the applicant during the stay?

Applicant       Host

**6. Financial situation in connection with travel and stay in Denmark?**

Will you the host vouch financially for the applicant in connection with travel and stay in Denmark?

Yes       No

If **yes** - please sign here \_\_\_\_\_





**C. Information regarding possible verification by the authorities of the information you have supplied**

The Danish Immigration Service may seek to verify the accuracy of the information you have given in this form. This may happen while the application is being reviewed or after the applicant has been granted a visa. Verification may be conducted at random and is not necessarily an indication that the Danish Immigration Service suspects you of providing false information.

Verification may involve the following:

- Checking public registers, such as the Central Person Register
- Contacting other authorities, such as municipalities

You may be asked to supply additional information as part of the verification process.

**D. Information about the consequences connected to the applicants illegal stay in Denmark or another Schengen country**

If the applicant is issued a visa, the applicant shall leave the Schengen region within the validity of the visa. The visa gives the holder the right to reside in the Schengen region for a predetermined number of days within a further defined period of validity. The period of validity is often longer than the number of days the visa is issued for.

The applicant may neither reside in the Schengen region for more than the permitted number of days, nor arrive or depart outside of the validity period.

If the applicant stays in Denmark or the Schengen region beyond the validity of the visa it may have serious consequences and the applicant may be given a penalty period. During this period the applicant will normally be unable to obtain a Schengen visa to enter Denmark. If the applicant exceeds the visa period by up to 30 days the applicant may be banned for 3 years, and if the applicant exceeds the visa period by more than 30 days a 5 year ban may be imposed.

**E. Consequences if the applicant is expelled from Denmark or applies for asylum in Denmark or another Schengen country**

If the applicant upon entering Denmark on a visa is expelled either by administrative decision or by court order, or if the applicant applies for asylum in Denmark or another Schengen country and does not leave voluntarily after the final rejection, the applicant will not be eligible for obtaining a new visa for a period of 5 years.

**F. Information about possible consequences if the applicant applies for a residence permit while in Denmark on a visa (short term)**

If the applicant is staying in Denmark on a visa (short term) and submits an application for a residence permit in this country, you need to be aware that the applicant can become ineligible for a visa for 5 years.

However, the abovementioned consequence does not apply in the following cases:

- Application for family reunification according to the Aliens Act section 9(1) (i) or (ii), or section 9 c(1).
- Application for a residence permit in order to study according to the Aliens Act section 9 c(1).
- Application for a residence permit in order to participate in the cities of refuge program according to the Aliens Act section 9 c(4).
- Application for a residence permit in order to work according to the Aliens Act section 9 a(2) (i-iv) or (vi).

Moreover, if there are decisive humanitarian reasons for allowing the applicant to remain eligible for a visa the abovementioned consequence will not apply.

**Please note:**

If the main purpose of the application for a residence permit is for the applicant to be allowed to remain in Denmark while the case is being processed, although it is evident that a residence permit cannot be granted, the applicant will become ineligible for a visa even though the kind of residence permit in question is included in the list above.

9. Signature	
<b>By signing below, I confirm that I have read, understood and accepted the terms laid out in section 8.</b>	
Date and place	Signature

# VU2



UDLÆNDINGESTYRELSEN  
DANISH IMMIGRATION SERVICE

# Invitation

VU2\_en\_150415\_v1.1

## Invitation form for visa applications

1. Information concerning the host – you, the inviting party	
PLEASE COMPLETE IN CAPITAL LETTERS	
First name	
Surname	
Address in Denmark	
Zip code	City
Nationality	Marital status
Telephone no. / mobile	E-mail
CPR-nr. (social security no.)	Alien no. or Alien-ID if applicable

2. Information concerning the visa applicant – the person requiring the visa	
PLEASE COMPLETE IN CAPITAL LETTERS	
First name	
Surname	
Date of birth, dd-mm-yyyy	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality	Marital status
Address in home country	Zip code
City	Country
Telephone no.	E-mail
Will the applicant be staying at your (the host's) residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If <b>no</b> – where will the applicant be staying?	
Address	
Zip code	City



<b>3. Information concerning your relation to the applicant</b> PLEASE COMPLETE IN CAPITAL LETTERS	
<b>Please attach a copy of any documentation for the relation</b>	
Are you related by family to the applicant?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If <b>yes</b> – in which way?	
_____	
If <b>no</b> – describe your relationship with the applicant	
_____	
If the applicant is your <b>girl-/boyfriend or fiancé</b> – please answer the following questions	
Have you met the applicant in person?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If <b>yes</b> – where (country) and when did you last meet the applicant? Please enclose documentation.	

<b>4. Information concerning the upcoming visit</b> PLEASE COMPLETE IN CAPITAL LETTERS	
When is the applicant to arrive?	How many days are you expecting the applicant?
_____	_____
What is the purpose of the visit?	
_____	
Are there any special circumstances to be taken into account concerning the visit?	
_____	
Is anyone accompanying the applicant to Denmark?	
_____	

<b>5. Information concerning the payment of costs in relation to the visit</b>
Who is paying for the applicant's travel expenses?
<input type="checkbox"/> Applicant <input type="checkbox"/> Host
Who is financially responsible for the applicant during the stay?
<input type="checkbox"/> Applicant <input type="checkbox"/> Host

<b>6. Financial situation in connection with travel and stay in Denmark?</b>
Will you the host vouch financially for the applicant in connection with travel and stay in Denmark?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>yes</b> – please sign here _____



## 7. Additional comments or information concerning the invitation or the visit

PLEASE COMPLETE IN CAPITAL LETTERS

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## 8. Declarations and information

### A. Sworn declaration of correctness

I hereby confirm that the information I have given in this form is correct.

If the information is found to be false, I am subject to the following penalties cf. the Danish Criminal Code section 161, the Aliens Act section 40 and section 59-60:

- Fine or imprisonment of up to 2 years.
- Reimbursing any expenses incurred by the Danish state as a consequence of the false information.

### B. Notification that the Danish authorities have registered information about you and your affairs

The information you supply or have supplied in connection with the application for a visa will be entered into, and stored in the Visa Information System (IVR-VIS and C-VIS) This also applies to information you may give in conjunction with an application to extend the applicant's stay. The registration is mandatory.

IVR-VIS is a computerised register maintained by the Danish Immigration Service. C-VIS is a computerised central visa register for the Schengen member states.

Any personal data concerning you which appear on the invitation form will be supplied to the relevant authorities of the Schengen Member States and processed by these authorities, for the purpose of a decision on the visa application. Such data will be entered into, and stored in the Visa Information System (IVR-VIS and C-VIS) for a maximum period of 5 years. During this period of time, 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. Furthermore, immigration and asylum authorities in the Member States will have access to the data for the purpose 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 the conditions, of examining an asylum application and on determining responsibility for such examination.

Under certain conditions the data will also be available to designated authorities of the Member States and to Europol (European Union's law enforcement agency) for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. You are entitled to right of access to the information registered about you in IVR-VIS and C-VIS and of the Member State which transmitted the data. Inquiries about this can be addressed to the Danish Immigration Service, Ryesgade 53, DK-2100 Copenhagen Ø, e-mail: [visa@us.dk](mailto:visa@us.dk).

You can request that data relating to you which are inaccurate be corrected and that data processed unlawfully be deleted. On your request, the authority examining the visa application will inform you of the manner in which you may exercise your right to check the personal data concerning you and have them corrected or deleted, including the related remedies according to Danish nation Law. The national supervisory authority in Denmark (the Danish Data Protection Agency) will consider claims concerning the protection of personal data. Inquiries about this can be addressed to the Danish Data Protection Agency, Borgergade 28, 5, DK-1300 Copenhagen K, e-mail: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

**C. Information regarding possible verification by the authorities of the information you have supplied**

The Danish Immigration Service may seek to verify the accuracy of the information you have given in this form. This may happen while the application is being reviewed or after the applicant has been granted a visa. Verification may be conducted at random and is not necessarily an indication that the Danish Immigration Service suspects you of providing false information.

Verification may involve the following:

- Checking public registers, such as the Central Person Register
- Contacting other authorities, such as municipalities

You may be asked to supply additional information as part of the verification process.

**D. Information about the consequences connected to the applicants illegal stay in Denmark or another Schengen country**

If the applicant is issued a visa, the applicant shall leave the Schengen region within the validity of the visa. The visa gives the holder the right to reside in the Schengen region for a predetermined number of days within a further defined period of validity. The period of validity is often longer than the number of days the visa is issued for.

The applicant may neither reside in the Schengen region for more than the permitted number of days, nor arrive or depart outside of the validity period.

If the applicant stays in Denmark or the Schengen region beyond the validity of the visa it may have serious consequences and the applicant may be given a penalty period. During this period the applicant will normally be unable to obtain a Schengen visa to enter Denmark. If the applicant exceeds the visa period by up to 30 days the applicant may be banned for 3 years, and if the applicant exceeds the visa period by more than 30 days a 5 year ban may be imposed.

**E. Consequences if the applicant is expelled from Denmark or applies for asylum in Denmark or another Schengen country**

If the applicant upon entering Denmark on a visa is expelled either by administrative decision or by court order, or if the applicant applies for asylum in Denmark or another Schengen country and does not leave voluntarily after the final rejection, the applicant will not be eligible for obtaining a new visa for a period of 5 years.

**F. Information about possible consequences if the applicant applies for a residence permit while in Denmark on a visa (short term)**

If the applicant is staying in Denmark on a visa (short term) and submits an application for a residence permit in this country, you need to be aware that the applicant can become ineligible for a visa for 5 years.

However, the abovementioned consequence does not apply in the following cases:

- Application for family reunification according to the Aliens Act section 9(1) (i) or (ii), or section 9 c(1).
- Application for a residence permit in order to study according to the Aliens Act section 9 c(1).
- Application for a residence permit in order to participate in the cities of refuge program according to the Aliens Act section 9 c(4).
- Application for a residence permit in order to work according to the Aliens Act section 9 a(2) (i-iv) or (vi).

Moreover, if there are decisive humanitarian reasons for allowing the applicant to remain eligible for a visa the abovementioned consequence will not apply.

**Please note:**

If the main purpose of the application for a residence permit is for the applicant to be allowed to remain in Denmark while the case is being processed, although it is evident that a residence permit cannot be granted, the applicant will become ineligible for a visa even though the kind of residence permit in question is included in the list above.

<b>9. Signature</b>	
<b>By signing below, I confirm that I have read, understood and accepted the terms laid out in section 8.</b>	
Date and place	Signature



# Invitation

VU3\_en\_150415\_v1.0

## Invitation for applying for a visa for cultural events, teaching sessions, courses, sport events etc.

### 1. Information concerning the **host** (association/organization/institution) in Denmark PLEASE COMPLETE IN CAPITAL LETTERS

Name of association/organisation/institution		CVR-No. (If applicable)	
Address in Denmark			
Zip code		City	
What is the purpose of the association/organisation/institution?			Homepage
Telephone no.		Email address	

### 2. Information concerning the host's **contact person** – the inviting party PLEASE COMPLETE IN CAPITAL LETTERS

First name	
Surname	CPR number
Telephone no./mobile	Email address
Contact address if different from the association/organisation/institution address	
The contact person's branch and position	

### 3. Information concerning the visa applicant – the person requiring the visa PLEASE COMPLETE IN CAPITAL LETTERS

First name	
Surname	
Date of birth (dd-mm-yyyy)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality	
Address in home country	Zip code
City	Country
Telephone no.	Email address

4. Information concerning the applicant's association/organisation/institution in his/her home country	
<b>PLEASE COMPLETE IN CAPITAL LETTERS</b>	
Which association/organisation/institution is the applicant affiliated with in he's/her home country?	
Address	Zip code
City	Country
Telephone no.	Email address
Homepage	

5. Information concerning the applicant's relation to the host association/organisation/institution in Denmark	
<b>PLEASE COMPLETE IN CAPITAL LETTERS</b>	
How was the contact between your association/organisation/institution and the applicant established?	
How was the contact between your association/organisation/institution and the applicant's association/organisation/institution established?	
Who is your contact person in the applicant's home country?	
Which association/organisation/institution is the contact person affiliated with?	
What is the contact person's position/function?	
Describe the applicant's background and/or qualifications for participating in the event in Denmark	

6. Information concerning the time and purpose of the visit	
<b>PLEASE COMPLETE IN CAPITAL LETTERS</b>	
When is the applicant to arrive?	How many days are you expecting the applicant?
What is the number of entries to Denmark requested?	
What is the purpose of the visit? – describe the event/the nature of the stay	
Are there any special circumstances or events to be taken into account during the processing of the application?	

7. Information concerning the payment of costs in relation to the visit	
<b>PLEASE COMPLETE IN CAPITAL LETTERS</b>	
Who is paying for the applicant's travel expenses?	
<input type="checkbox"/> Applicant <input type="checkbox"/> Host <input type="checkbox"/> Other	
Who is financially responsible for the applicant during the stay?	
<input type="checkbox"/> Applicant <input type="checkbox"/> Host <input type="checkbox"/> Other	
Where will the applicant be staying during the visit?	



Under certain conditions the data will also be available to designated authorities of the Member States and to Europol (European Union's law enforcement agency) for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. You are entitled to right of access to the information registered about you in IVR-VIS and C-VIS and of the Member State which transmitted the data. Inquiries about this can be addressed to the Danish Immigration Service, Rymsgade 53, DK-2100 Copenhagen Ø, e-mail: [visa@us.dk](mailto:visa@us.dk).

You can request that data relating to you which are inaccurate be corrected and that data processed unlawfully be deleted. On your request, the authority examining the visa application will inform you of the manner in which you may exercise your right to check the personal data concerning you and have them corrected or deleted, including the related remedies according to Danish nation Law. The national supervisory authority in Denmark (the Danish Data Protection Agency) will consider claims concerning the protection of personal data. Inquiries about this can be addressed to the Danish Data Protection Agency, Borgergade 28, 5, DK-1300 Copenhagen K, e-mail: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

**C. Information regarding possible verification by the authorities of the information you have supplied**

The Danish Immigration Service may seek to verify the accuracy of the information you have given in this form. This may happen while the application is being reviewed or after the applicant has been granted a visa. Verification may be conducted at random and is not necessarily an indication that the Danish Immigration Service suspects you of providing false information.

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- Contacting other authorities, such as municipalities

You may be asked to supply additional information as part of the verification process.

**D. Information about the consequences connected to the applicants illegal stay in Denmark or another Schengen country**

If the applicant is issued a visa, the applicant shall leave the Schengen region within the validity of the visa. The visa gives the holder the right to reside in the Schengen region for a predetermined number of days within a further defined period of validity. The period of validity is often longer than the number of days the visa is issued for.

The applicant may neither reside in the Schengen region for more than the permitted number of days, nor arrive or depart outside of the validity period.

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**E. Consequences if the applicant is expelled from Denmark or applies for asylum in Denmark or another Schengen country**

If the applicant upon entering Denmark on a visa is expelled either by administrative decision or by court order, or if the applicant applies for asylum in Denmark or another Schengen country and does not leave voluntarily after the final rejection, the applicant will not be eligible for obtaining a new visa for a period of 5 years.

**F. Information about possible consequences if the applicant applies for a residence permit while in Denmark on a visa (short term)**

If the applicant is staying in Denmark on a visa (short term) and submits an application for a residence permit in this country, you need to be aware that the applicant can become ineligible for a visa for 5 years.

However, the abovementioned consequence does not apply in the following cases:

- Application for family reunification according to the Aliens Act section 9(1) (i) or (ii), or section 9 c(1).
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- Application for a residence permit in order to participate in the cities of refuge program according to the Aliens Act section 9 c(4).
- Application for a residence permit in order to work according to the Aliens Act section 9 a(2) (i-iv) or (vi).

Moreover, if there are decisive humanitarian reasons for allowing the applicant to remain eligible for a visa the abovementioned consequence will not apply.

**Please note:**

If the main purpose of the application for a residence permit is for the applicant to be allowed to remain in Denmark while the case is being processed, although it is evident that a residence permit cannot be granted, the applicant will become ineligible for a visa even though the kind of residence permit in question is included in the list above.



## 11. Signature

**By signing below, I confirm that I have read, understood and accepted the terms laid out in section 10.**

Date and place

Signature





# Invitation – seaman's visa

VU4\_en\_150415\_v1.0

## Invitation form for seaman's visa applications

1. Information concerning the <b>inviting company</b>		PLEASE COMPLETE IN CAPITAL LETTERS
Company name	CVR-no.	
Company address in Denmark		
Zip code	City	
Field of business	Homepage	
Telephone no.	Fax-no.	E-mail

2. Information concerning the host company's <b>contact person</b> – the inviting party			PLEASE COMPLETE IN CAPITAL LETTERS
First name			
Surname			
Contact address if different from company address			
Telephone no./mobile	Fax-no.	E-mail	
Branch and position			

3. Information concerning the <b>visa applicant</b> – the seaman requiring the visa		PLEASE COMPLETE IN CAPITAL LETTERS
First name		
Surname		
Date of birth, dd-mm-yyyy	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality		
Address in home country	Zip code	
City	Country	
Telephone no.	E-mail	



**4. Information concerning an agency/bureau or similar representing the seaman**

PLEASE COMPLETE IN CAPITAL LETTERS

Is the seaman affiliated with a company in his/her home country (agency/bureau or similar)?

Yes       No

If **yes**, please complete the following:

Company name

Company address

Zip code

City

Country

Telephone no.

Fax-no.

E-mail

Homepage

Field of business

**5. Information concerning the seaman and his/her employment**

PLEASE COMPLETE IN CAPITAL LETTERS

Does the seaman have a Seaman's Book?

Yes       No

If **yes**, please complete the following:

Seaman's Book no.:

Seaman's Book issued by (country):

How long is the seaman's contract valid?

How many days of visa are requested?

Is the seaman covered by health insurance?

Yes       No

Has your company previously been visited by the seaman?

Yes       No

If **yes**, during which period of time was the latest contract valid?

Has the seaman previously held a Schengen Visa?

Yes       No

If **yes**, during which period of time was the latest Schengen Visa valid?

What is the name of the ship the seaman is to sign on?

Where is the seaman to sign on?

What is the expected date of signing on?

Where is the seaman expected to sign off?

What is the expected date of signing off?

What is the seaman's task (especially regarding cruise ships)?

Will you, the host, vouch financially for the seaman in connection with travel and stay in Denmark?

Yes       No

If **yes**, please sign here \_\_\_\_\_  
(Section 8 must be signed by the same person)



Protection Agency) will consider claims concerning the protection of personal data. Inquiries about this can be addressed to the Danish Data Protection Agency, Borgergade 28, 5, DK-1300 Copenhagen K, e-mail: [dt@datatilsynet.dk](mailto:dt@datatilsynet.dk).

**C. Information regarding possible verification by the authorities of the information you have supplied**

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- Application for a residence permit in order to work according to the Aliens Act section 9 a(2) (i-iv) or (vi).

Moreover, if there are decisive humanitarian reasons for allowing the applicant to remain eligible for a visa the abovementioned consequence will not apply.

**Please note:**

If the main purpose of the application for a residence permit is for the applicant to be allowed to remain in Denmark while the case is being processed, although it is evident that a residence permit cannot be granted, the applicant will become ineligible for a visa even though the kind of residence permit in question is included in the list above.

**8. Signature**

**By signing below, I confirm that I have read, understood and accepted the terms laid out in section 7.**

Date and place

Signature

**Specimen of Germany's form of providing proof of sponsorship  
and/or private accommodation**



Person / Personne / Person  
 Firma / Société / Company  
 Verband / Association / Association

**VERPFLICHTUNGSERKLÄRUNG**

DÉCLARATION DE PRISE EN CHARGE  
 FORMAL OBLIGATION

**Ich, der / die Unterzeichnende Je, soussigné(e) I, the undersigned**

Name / Nom / Surname

Vorname(n) / Prénom(s) / First name

Geburtstag und -ort / Né(e) le/à / Date and place of birth

Staatsangehörigkeit / Nationalité / Nationality

Identitätsdokument<sup>(1)</sup>/Aufenthaltstitel<sup>(2)</sup> / Document d'identité<sup>(1)</sup>/Titre de séjour<sup>(2)</sup> / Identity card<sup>(1)</sup>/Residence title<sup>(2)</sup>

wohnhaft in / Adresse / Address

Beruf / Profession / Profession

Zuständige Behörde  
 Autorité compétente  
 Competent authority

**verpflichte mich gegenüber der  
 Ausländerbehörde / Auslands-  
 vertretung, für**

**m'engage auprès du service des  
 étrangers / de la représentation  
 diplomatique à héberger**

**take full responsibility towards the  
 aliens authority / diplomatic  
 representation for accommodating**

Name / Nom / Surname

Vorname(n) / Prénom(s) / First name

Geburtstag und -ort / Né(e) le/à / Date and place of birth

Staatsangehörigkeit / Nationalité / Nationality

Reisepaß Nr. / Passeport n° / Passport No.

wohnhaft in / Adresse / Address

(1)  
 Art / type / type  
 Nummer / numéro / number

(2)  
 Nur bei Ausländern, Art des Titels  
 seulement pour les étrangers, type de titre  
 applicable to foreigners only, type of title

(3)  
 Name / nom / surname  
 Vorname / prénom / first name  
 Geburtstag / date de naissance / date of birth  
 Geschlecht / sexe / sex

Verwandtschaftsbeziehung mit dem Antragsteller / Lien de parenté avec le demandeur / Family relationship to applicant

und folgende sie/ihn begleitende Personen, nur Ehegatten<sup>(3)</sup> / accompagné(e) de son conjoint<sup>(3)</sup> / accompanied by his or her spouse<sup>(3)</sup>

und Kinder<sup>(3)</sup> / accompagné(e) de ses enfants<sup>(3)</sup> / accompanied by children<sup>(3)</sup>

Dauer der Verpflichtung / Durée de la prise en charge / Duration of obligation

vom Beginn der voraussichtlichen Visungültigkeit am ... bis zur Beendigung des Aufenthalts o.g. Ausländers/in oder bis zur Erteilung eines Aufenthaltstitels zu einem anderen Aufenthaltszweck / à partir du premier jour prévu de la durée de validité du visa, le ... jusqu'à la fin du séjour de l'étranger susmentionné ou jusqu'à la délivrance d'un titre de séjour pour un autre motif de séjour / starting with the presumable first day of validity of the visa on ... up to the termination of the foreigner's stay or up to the issue of a residence title for another residence purpose

**nach § 68 des Aufenthaltsgesetzes die Kosten für den Lebensunterhalt und nach §§ 66 und 67 des Aufenthaltsgesetzes die Kosten für die Ausreise o.g. Ausländers/in zu tragen.**

**et à prendre en charge les frais de subsistance de l'étranger susmentionné conformément à l'article 68 de la loi relative au séjour ainsi que les frais de retour conformément aux articles 66 et 67 de la loi relative au séjour.**

**and for bearing the living costs according to § 68 of the Residence Act, and the costs for the departure of the above-mentioned foreigner according to §§ 66 and 67 of the Residence Act.**

Die Verpflichtung umfasst die Erstattung sämtlicher öffentlicher Mittel, die für den Lebensunterhalt einschließlich der Versorgung mit Wohnraum und der Versorgung im Krankheitsfall und bei Pflegebedürftigkeit aufgewendet werden (z. B. Arztbesuch, Medikamente, Krankenhausaufenthalt). Dies gilt auch, soweit die Aufwendungen auf einem gesetzlichen Anspruch beruhen, (z.B. Leistungen nach dem Zweifeln oder Zweifeln Buch Sozialgesetzbuch oder dem Asylwerberleistungsgesetz) im Gegensatz zu Aufwendungen, die auf einer Beitragsleistung beruhen.

Die Verpflichtung zur Erstattung von Kosten für den Krankheitsfall lässt die Verpflichtung des Ausländers zum Nachweis eines ausreichenden Krankenversicherungsschutzes bei der zuständigen Auslandsvertretung unberührt.

Die vorliegende Verpflichtung umfasst auch die Ausreisekosten (z. B. Flugticket) a. g. Ausländers/in. Darüber hinaus werden von dieser Verpflichtungserklärung die Kosten einer zwangsweisen Aufenthaltsbeendigung z. B. Abschiebung a. g. Ausländers/in nach den §§ 66 und 67 des Aufenthaltsgesetzes erfasst. Hierzu gehören z. B. Beförderungs- und Reisekosten bis zum ausländischen Zielort, eventuell notwendige Begleiterkosten, Übersetzungskosten, Verpflegungs- und Haftkosten.

Der Erstattungsanspruch gegenüber dem Verpflichtenden steht der Behörde zu, die entsprechende öffentliche Mittel für a. g. Ausländer/in aufgewendet hat (§ 68 Abs. 2 S.3 des Aufenthaltsgesetzes).

Ich würde von der Ausländerbehörde/Auslandsvertretung hingewiesen auf:

- den Umfang und die Dauer der Haftung und über die Bindungswirkung dieser Verpflichtung,
- die Notwendigkeit von Versicherungsschutz,
- die zwangsweise Beitreibung der aufgewendeten Kosten im Wege der Vollstreckung, soweit ich meiner Verpflichtung nicht nachkomme,
- die Strafbarkeit z. B. bei vorsätzlich unrichtigen oder unvollständigen Angaben (§ 95 des Aufenthaltsgesetzes – Freiheitsstrafe bis zu drei Jahren oder Geldstrafe), sowie
- die Speicherung meiner Daten gemäß § 69 Abs. 2 Nr. 2h der Aufenthaltsverordnung.

Ich bestätige, zu der Verpflichtung aufgrund meiner wirtschaftlichen Verhältnisse in der Lage zu sein.

Behörden-  
vermerke

Reservé à  
l'administration

Official  
remarks

Anschrift der Wohnung, in der die Unterkunft sichergestellt wird, falls abweichend vom gewöhnlichen Wohnsitz des Unterkunftgebers /  
Adresse du logement dans lequel l'hébergement sera assuré, au cas où il serait différent du logement habituel de l'hébergeant /  
Address of the lodging where accommodation will be provided, if different from the undersigned's normal address

Arbeitgeber / Employeur / Employer

Gebühren

#### Der/die Verpflichtungserklärende

Ich versichere, die vorstehenden Angaben nach bestem Wissen und Gewissen richtig und vollständig gemacht zu haben und gene eine entsprechende Verpflichtung ein.

Ort

Datum

Unterschrift

#### Bemerkungen

#### Beglaubigungsvermerk der Ausländerbehörde/Auslandsvertretung

Die Unterschrift des/der Verpflichtungserklärenden ist vor mir vollzogen worden. Diese Beglaubigung der Unterschrift dient nur zur Vorlage bei der deutschen Auslandsvertretung.

Behörde

Im Auftrag

Ort

Datum

(Siegel)

#### Stellungnahme der Ausländerbehörde/Auslandsvertretung

Die finanzielle Leistungsfähigkeit des/der Verpflichtungserklärenden wurde  
glaubhaft gemacht  nicht glaubhaft gemacht   
nachgewiesen  nicht nachgewiesen

Behörde

Im Auftrag

Ort

Datum

(Siegel)

Specimen of France's form of providing proof of sponsorship and/or private accommodation

Coupon-réponse

(réservé au Consulat, à détacher et à renvoyer au maire de la commune où l'étranger accueilli réside)

République française



n° 10799\*04

Document souscrit en application des articles R.211-1 à R.212-6 et L.211-3 à L.211-5 du code de l'entrée et du séjour des étrangers et du droit d'asile.

ATTESTATION D'ACCUEIL

UNTERKUNFTSNACHWEIS  
PROOF OF ACCOMMODATION

F

(I) Je, soussigné(e) Ich, der/die Unterzeichnende I, the undersigned

Nom / Name / Last Name

Prénom(s) / Vorname(n) / First name

Né(e) le / à / Geburtsdatum und -ort / Date and place of birth

Nationalité / Staatsangehörigkeit / Nationality

Document d'identité<sup>(1)</sup> ou titre de séjour<sup>(1)</sup> / Identitätsnachweis<sup>(1)</sup> oder Aufenthaltstitel<sup>(1)</sup> / Identity<sup>(1)</sup> or residence document<sup>(1)</sup>

Adresse complète / Wohnhaft in / Full address

(II) Certifié pouvoir accueillir : bescheinige folgende Person(en) unterbringen zu können : declare that I can accommodate :

Nom / Name / Last name

Prénom(s) / Vorname(n) / First name

Né(e) le / à / Geburtsdatum und -ort / Date and place of birth

Nationalité / Staatsangehörigkeit / Nationality

Passeport n° / Reisepass - Nr. / Passport No.

Adresse / Wohnhaft in / Address

Accompagné(e) de son conjoint<sup>(2)</sup> / Mit Ehegatten<sup>(2)</sup> / Accompanied by spouse<sup>(2)</sup>

Accompagné(e) de ses enfants mineurs de 18 ans<sup>(2)</sup> / Mit minderjährigen Kindern<sup>(2)</sup> / Accompanied by minor children<sup>(2)</sup>

Pendant (...jours) entre le... et le... / Für (...Tage) vom... bis... / For (...days) from... to...

Liens de parenté avec le demandeur / Verwandtschaftsgrad zum Antragsteller / Relationship with applicant

Attestations d'accueil antérieurement signées par l'hébergeant / Unterkunftsnachweise die vorher vom Aufnahmemenden unterzeichnet worden sind / Prior proof of accommodation already signed by signee

Pour le ou les mineur(s) étranger(s) hébergé(s) / Für ein/die gleichen untergebrachten Ausländer / For the same persons accommodated Pour d'autres / Für andere Ausländer / For other persons Date<sup>(3)</sup> / Datum<sup>(3)</sup> / Date<sup>(3)</sup>



Département, commune  
Zuständige Verwaltung  
Conseil municipal

(Pier ici)

Bénéficiaire de l'attestation d'accueil

n° F

Visa délivré

Visa refusé

signature de l'autorité consulaire  
date et cachet

(1) Type / Art / Type  
Numéro / Nummer / Number.  
Date et lieu de délivrance  
/ Ausstellungsdatum und -ort  
/ Date and place of issue.

(2) Nom / Name / Last name,  
Prénom / Vorname / First name,  
Date de naissance / Geburtsdatum /  
Date of birth  
Sexe / Geschlecht / Sex.

(3) Préciser les années / Angabe der  
Jahre / Specify years

### (III) Dans le logement dont les caractéristiques figurent ci-dessous

#### 1/ Cas où l'accueil est assuré au domicile principal de l'hébergeant :

adresse complète :  
n° bâtiment / escalier /

surface du logement : ..... m<sup>2</sup> ; nombre de pièces : .....

état sanitaire :

nombre d'occupants habituels (préciser l'âge et le lien de parenté) :

occupants permanents : occupants temporaires :

propriétaire  locataire  autre : (préciser)

#### 2/ Cas où l'accueil est assuré au domicile secondaire de l'hébergeant :

adresse complète :  
n° bâtiment / escalier /

surface du logement : ..... m<sup>2</sup> ; nombre de pièces : .....

état sanitaire :

nombre d'occupants habituels (préciser l'âge et le lien de parenté) :

occupants permanents : occupants temporaires :

propriétaire  locataire  autre : (préciser)

#### 3/ Engagement et information de l'hébergeant :

##### Je m'engage à héberger

M  
Mme  
Mlle

à mon domicile ci-dessus visé pendant toute la durée de validité du visa ou pendant une durée de trois mois à compter de l'entrée de M/Mme/Mlle sur le territoire des Etats parties à la Convention de Schengen, je m'engage à prendre en charge ses frais de séjour pour le cas où il/elle n'y pourvoirait pas. Ces frais sont limités au montant des ressources exigées de la part de l'étranger pour son entrée sur le territoire en l'absence d'une attestation d'accueil, en l'occurrence le montant journalier du SMIC.

Je suis informé(e) de ce que, sur la demande éventuelle du maire, un agent de ses services ou de l'office des migrations internationales est susceptible de venir procéder à mon domicile à une vérification de la réalité des conditions d'hébergement et je déclare donner mon consentement à cette initiative.

#### 4/ Assurance :

Je n'entends pas assurer l'hébergé (1)  
L'attestation de souscription d'assurance médicale par l'hébergé auprès d'un opérateur d'assurance agréé doit couvrir, à hauteur d'un montant minimum, fixé à 30 000 euros, l'ensemble des dépenses médicales et hospitalières, y compris d'aide sociale, susceptibles d'être engagées pendant toute la durée du séjour en France de l'étranger.

J'entends assurer l'hébergé (2)  
L'attestation d'assurance souscrite par l'hébergeant au profit de l'hébergé doit présenter les mêmes garanties que dans le cas précédent.

#### 5/ Attestation sur l'honneur :

J'atteste sur l'honneur l'exactitude des renseignements portés ci-dessus :

LUI ET APPROUVE  
signature

(1) (2) L'étranger (le visa) procureur ou poste de police à la frontière, et au commissariat il est soumis à obligation de visa, l'attestation d'accueil accompagnée de la présente attestation d'assurance.

LA LOI N°178-17 DU 6 JANVIER 1978 MODIFIÉE relative à l'Informatique, aux fichiers et aux libertés s'applique aux réponses faites sur ce formulaire et garantit un droit d'accès et de rectification pour les données vous concernant auprès de la mairie.

Droit de l'information (art. 37 du règlement (CE) N°1781-2008 concernant le système d'information sur les visas (VIS) et l'échange de données entre les Etats membres en matière de visas de court séjour)

Aux fins de l'examen de ma demande d'attestation d'accueil, il y a lieu de recueillir les données requises dans ce formulaire. Les données à caractère personnel me concernant qui y figurent seront communiquées aux autorités consulaires et traitées par elles, aux fins de la décision relative à la demande de visa de la personne que je m'engage à accueillir. Ces données seront valables et conservées dans le système d'information sur les visas (VIS) pendant une période maximale de cinq ans, durant laquelle elles seront accessibles aux autorités chargées des visas, aux autorités compétentes chargées de contrôler les visas aux frontières extérieures et dans les Etats membres, aux autorités compétentes en matière d'immigration et d'asile dans les Etats membres aux fins de la vérification du respect des conditions d'entrée et de séjour réguliers sur le territoire des Etats membres, aux fins de l'identification des personnes qui ne remplissent pas ou plus ces conditions, aux fins de l'examen d'une demande d'asile et de la

détermination de l'autorité responsable de cet examen. Dans certaines conditions, ces données seront aussi accessibles aux autorités désignées des Etats membres et à l'Europe aux fins de la prévention et de la détection des infractions terroristes et des autres infractions pénales graves, ainsi qu'aux fins des enquêtes en la matière.

Je suis informé(e) de mon droit d'obtenir la notification des données me concernant qui sont enregistrées dans le VIS, et de demander leur rectification si elles sont erronées, ou leur suppression si elles ont été traitées de façon illicite. L'autorité de contrôle nationale (Commission Nationale de l'Informatique et des Libertés - 3 Place de Fontenay - TSA 80715 - 75334 PARIS CEDEX 07) pourra être saisie des demandes concernant la protection des données à caractère personnel.

ARTICLE L-622-1 du code de l'entrée et du séjour des étrangers et du droit d'asile :

Alinéa 1 - Toute personne qui aura, pour aide directe ou indirecte, facilité ou tenté de faciliter l'entrée, la circulation ou le séjour irréguliers, d'un étranger en France sera punie d'un emprisonnement de cinq ans et d'une amende de 30 000 euros.

Alinéa 2 - sera puni des mêmes peines celui qui, quelle que soit sa nationalité, aura commis le délit défini au premier alinéa du présent article alors qu'il se trouvait sur le territoire d'un Etat partie à la convention signée à Schengen le 19 juin 1990 autre que la France.

Alinéa 3 - sera puni des mêmes peines celui qui aura facilité ou tenté de faciliter l'entrée, la circulation ou le séjour irréguliers d'un étranger sur le territoire d'un autre Etat partie à la convention signée à Schengen le 19 juin 1990.

Alinéa 4 - sera puni des mêmes peines celui qui aura facilité ou tenté de faciliter l'entrée, la circulation ou le séjour irréguliers d'un étranger sur le territoire d'un autre Etat partie au protocole contre le trafic illicite de migrants par terre, air, mer, additionnel à la convention des Nations unies contre la criminalité transnationale organisée, signée à Palerme le 12 décembre 2000.

ARTICLE 441-3 DU CODE PÉNAL : le fait de procurer frauduleusement à autrui un document délivré par une administration publique aux fins de constater un droit, une identité ou d'accorder une autorisation est puni de cinq ans d'emprisonnement et de 75 000 euros d'amende. Ces peines peuvent être portées à sept ans d'emprisonnement et à 100 000 euros d'amende dans les cas énumérés au 2<sup>ème</sup> alinéa du même article.

ARTICLE 441-6 DU CODE PÉNAL : le fait de se faire délivrer indûment, notamment en fournissant une déclaration mensongère, par une administration publique un document destiné à constater un droit, une identité ou une qualité ou à accorder une autorisation est puni de deux ans d'emprisonnement et de 30 000 euros d'amende.

#### réserve à l'administration

Justificatifs du domicile principal de l'hébergeant et documents permettant d'apprécier la capacité d'hébergement dans des conditions normales et les ressources.

#### réserve à l'administration

Justificatifs de domicile secondaire de l'hébergeant et documents permettant d'apprécier la capacité d'hébergement dans des conditions normales et les ressources.

#### Le maire :

Date :

signature / cachet / timbre fiscal

#### L'autorité consulaire :

Date :

signature et cachet

#### Les services de contrôle à l'entrée sur le territoire

date et cachet

**Specimen of Hungary's form of providing proof of sponsorship  
and/or private accommodation**

Specimen of Iceland's form of providing proof of sponsorship and/or private accommodation

## Ábyrgðaryfirlýsing vegna heimsóknar

## Guarantee form for visits

Upplýsingar fyrir ábyrgðaraðila framfærslu

Information for the one giving financial guarantee

- Fyllið út eyðublað fyrir hvern umsækjanda.
- Ábyrgðaraðili fyllir út og undirritar 1. hluta.
- Umsækjandi fyllir út og undirritar 2. hluta.
- Ábyrgðaraðili sendir útfyllta og undirritaða ábyrgðaryfirlýsingu ásamt fylgiskjöllum til umsækjanda.
- Umsækjandi leggur ábyrgðaryfirlýsinguna fram ásamt öðrum fylgiskjöllum þegar sótt er um áritun.
- ATH! Umsækjandi þarf að hafa afrit af eyðublaðinu meðferðis þegar ferðast er inn á Schengen svæðið.
- Complete one form for each applicant.
- Part 1 is to be completed and signed by the guarantor.
- Part 2 is to be completed and signed by the applicant.
- The guarantor must send the guarantee form in original form to the applicant, along with supporting documents.
- The applicant must then present the original form and other supporting documents when applying for a visa.
- IMPORTANT! The applicant must bring a copy of this form with him/her when entering the Schengen area.

### 1. Fyllist út af einstaklingi, fyrirtæki eða samtökum sem ábyrgjast heimsókn / To be completed by the person, company or organization guaranteeing the visit.

Kenninafn / Surname	Eiginnafn (nöfn) / Given name(s)
Heimili / Address	
Kennitala / Icelandic ID number	Ríkisfang / Citizenship
Símanúmer / Telephone number	Netfang / E-mail address
Ábyrgist þú í nafni vinnuveitanda? Do you provide the guarantee on behalf of your employer? <input type="radio"/> Já/Yes <input type="radio"/> Nei/No	Nafn vinnuveitanda / Name of the employer
Heimilisfang vinnuveitanda / The employer's address	Kennitala vinnuveitanda / The employer's ID number
Eru tekjur þínar skjalfestar? / Is your income documented? <input type="radio"/> Já/Yes <input type="radio"/> Nei/No	Ef já, með hvaða hætti? (skattframtal/launaseðlar/bankayfirlit) / If yes, which documents? (tax return/payslips/bank statement)
Ef fyrirtæki er ábyrgðaraðili, fylgir umboð fyrirtækis? / If the guarantee is on behalf of a company, is an authorization from the employer submitted?	
Athugasemdir / Other remarks, if any	

### Upplýsingar um umsækjanda / Information on the applicant.

Kenninafn / Surname	Eiginnafn / Given name	Millinafn / Middle name
Fæðingardagur (dagur/mánuður/ár) / Date of birth (day/month/year)	Kyn / Gender <input type="radio"/> karl / male <input type="radio"/> kona / female	Ríkisfang / Citizenship
Heimilisfang / Address		
Símanúmer / Telephone number	Netfang / E-mail address	
Áætlaður komudagur til Íslands / Date of planned arrival to Iceland	Áætlaður brottfarardagur frá Íslandi / Date of planned departure from Iceland	
Heimilisfang þar sem umsækjandi mun búa á Íslandi / The applicant's address while in Iceland	Ert þú ættingi umsækjanda? Ef svo er, hver er skyldleiki? / Are you related to the visitor? If so, please specify relationship	

<input type="checkbox"/> Ég þekki umsækjanda og veit af komu hans. <i>I know the applicant and I am aware of the visit.</i>		
<input type="checkbox"/> Ég lýsi því yfir að ég geti og muni ábyrgjast allan kostnað við fæði og húsnæði fyrir umsækjanda á meðan á dvöl hans stendur. <i>declare that I will cover the applicant's expenses for board and lodging during the applicant's stay.</i>		
<input type="checkbox"/> Ég lýsi því yfir að ég geti og muni ábyrgjast kostnað vegna heimferðar umsækjanda. Ef þörf er á fylgdarmanni, lýsi ég því yfir að ég geti og muni ábyrgjast kostnað vegna heimferðar allt að þriggja fylgdarmanna. <i>I declare that I can and will cover return trip expenses for the applicant. If expenses for a companion are incurred, I declare that I can and will cover expenses for up to three companions.</i>		
<input type="checkbox"/> Mér er kunnugt um að standi ég ekki við loforð mitt um að greiða kostnað vegna fæðis, húsnæðis og hugsanlega kostnað vegna heimferðar umsækjanda, uppfylli umsækjandi ekki lengur skilyrði til dvalar hér á landi. <i>I am aware that if I fail to fulfil my obligations to cover board and lodging and any return-trip expenses, the applicant no longer fulfills the conditions for his/her stay in Iceland.</i>		
<input type="checkbox"/> Mér er kunnugt um og samþykki að hluti þeirra upplýsinga sem fram koma í yfirlýsingu þessari verða skráðar og geymdar í upplýsingakerfinu VIS (Visa Information System) til allt að fimm ára. Á þessu tímabili verða upplýsingarnar aðgengilegar áritanayfirvöldum og yfirvöldum bærum til að skoða áritanir á landamærum og innan Schengen aðildarríkjanna, í þeim tilgangi að staðfesta hvort skilyrði fyrir lögmætri komu og dvöl í aðildarríkjum Schengen aðildarríkjanna eru uppfyllt. Eftirfarandi upplýsingar verða skráðar í VIS: • Fullt nafn og heimilisfang ábyrgðaraðila framfærslu. • Í tilfelli fyrirtækis eða samtaka: Nafn og heimilisfang fyrirtækis/samtaka sem ábyrgjast framfærslu, sem og fullt nafn tengiliðs fyrirtækisins/samtakanna. Skýlt er að safna gögnum vegna afgreiðslu umsóknarinnar. Við tiltekna aðstæður munu tilnefnd yfirvöld aðildarríkjanna og Evrópulögreglan einnig hafa aðgang að upplýsingunum í þeim tilgangi að koma í veg fyrir, koma upp um og rannsaka hryðjuverk og aðra alvarlega, refsiverða verknæði. Yfirvaldið í aðildarríkinu, sem ber ábyrgð á vinnslu gagnanna, er: Útlendingastofnun, Dalvegi 18, 201 Kópavogi, www.utl.is.  Mér er kunnugt um að ég á rétt á, í hvaða aðildarríki sem er, að fá tilkynningu um það hvaða gögn um mig eru skráð í upplýsingakerfið um vegabréfsáritanir og um það hvaða aðildarríki sendi gögnin, sem og á að fara fram á að röng gögn um mig séu leiðrétt og að gögnum um mig, sem unnin eru á ólögmætán hátt, sé eytt. Fari ég gagnert fram á það, munu yfirvöldin, sem annast meðferð umsóknar minnar, upplýsa mig um það hvernig ég get nýtt mér rétt minn til að skoða persónuupplýsingar um mig og láta leiðrétta þær eða eyða þeim, þ.m.t. tengd úrræði samkvæmt landslögum hlutaðeigandi ríkis. Innlent eftirlitsyfirvald þess aðildarríkis – Persónuvernd, Rauðarárstíg 10, 105 Reykjavík, <a href="http://www.personuvernd.is">www.personuvernd.is</a> – tekur kærur varðandi vernd persónuupplýsinga til meðferðar.  <i>I am aware of, and consent to, some data given in this form being entered into and stored in the Visa Information System (VIS) for a maximum period of five years. During this time it will be accessible to the visa authorities and the authorities competent to carry out checks on visas at external borders and within the Schengen Member States, for the purpose of verifying whether the conditions for the legal entry into and stay on the territory of the Member States are fulfilled. The following information will be entered into VIS: • The full name and address of the person who will guarantee for the subsistence costs during the stay. • In the case of a company or organisation: The name and address of the company/organisation that will guarantee for the subsistence costs during the stay, as well as the full name of the contact person in the company/organization. The collection of the data is mandatory for the examination of the application. 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: Directorate of Immigration, Dalvegi 18, 201 Kópavogi, Iceland, <a href="http://www.utl.is">www.utl.is</a>.         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 processing 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 – Data Protection Authority, Rauðarárstíg 10, 105 Reykjavík, Iceland, <a href="http://www.personuvernd.is">www.personuvernd.is</a> – will hear claims concerning the protection of personal data.</i>		
<input type="checkbox"/> Ég samþykki að þessa yfirlýsingu megi sýna öðrum stjórnvöldum en Útlendingastofnun, án þess að það teljist brot á þagnarskyldu. <i>I consent to this guarantee form being submitted to an administrative body other than the Directorate of Immigration, notwithstanding the provisions of the Act on Protection of Privacy.</i>		
<input type="checkbox"/> Ég staðfesti að upplýsingar þær sem ég hef gefið séu sannar og réttar og að ekkert sé þar undanskilið. <i>I declare that the information I have supplied is complete, true and correct.</i>		
<input type="checkbox"/> Ég er meðvitaður um að gefi ég opinberu stjórnvaldi rangar upplýsingar geti það varðað refsingu sbr. XV. kafla almennra hegningarlaga nr. 19/1940. <i>I am aware that giving wrong information to public authorities may be subject to penalties cf. section XV of the Icelandic Penal Code No. 19/1940.</i>		
Staður og dagsetning <i>Place and date</i>	Undirskrift ábyrgðaraðila <i>Signature of the guarantor</i>	Stimpill og undirskrift vinnuveitanda (ef þú ábyrgist vegna vinnuveitanda). <i>Stamp and signature of employer (if the guarantee is provided on behalf of the employer)</i>

## 2. Umsækjandi skal fylla út þennan hluta / This part is to be completed by the applicant.

Kenninafn / Surname	Eiginnafn / Given name	Millinafn / Middle name
Fæðingardagur / Date of birth	Ríkisfang / Citizenship	Kyn / Gender <input type="radio"/> karl / male <input type="radio"/> kona / female
Heimilisfang / Home address		
Símanúmer / Telephone number	Netfang / E-mail address	
Vegabréfsnúmer / Travel document number	Útgáfudagur / Date of issue	Gildir til / Valid until

Dagsetning áætlaðrar komu / <i>Date of planned arrival</i>	Dagsetning áætlaðrar brottfarar / <i>Date of planned departure</i>	Tilgangur ferðar / <i>Purpose of visit</i>
Heimilisfang þar sem þú munt dvelja á Íslandi / <i>Address you will stay at in Iceland</i>		Ert þú tengdur gestgjafa? Ef svo er, með hvaða hætti? / <i>Are you related to the person you want to visit?</i> <i>If so, please clarify relationship.</i>
<input type="checkbox"/> Ég staðfesti að upplýsingar þær sem ég hef gefið séu sannar og réttar og að ekkert sé þar undanskilið. <i>I declare that the information I have supplied is complete, true and correct.</i>		
<input type="checkbox"/> Ég samþykki að þessa yfirlýsingu megi sýna öðrum stjórnvöldum en Útlendingastofnun, án þess að það teljist brot á þagnarskyldu. <i>I consent to this guarantee form being submitted to an administrative body other than the Directorate of Immigration, notwithstanding the provisions of the Act on Protection of Privacy.</i>		
<input type="checkbox"/> Ég er meðvitaður um að gefi ég opinberu stjórnvaldi rangar upplýsingar geti það varðað refsingu sbr. XV. kafla almennra hegningarlaga nr. 19/1940. <i>I am aware that giving wrong information to public authorities may be subject to penalties cf. section XV of the Icelandic Penal Code No. 19/1940.</i>		
Staður og dagsetning <i>Place and date</i>	Undirskrift umsækjanda / <i>Signature of the applicant</i>	Stimpill sendiráðs eða ræðisskrifstofu / <i>Stamp of the embassy or consulate</i>



## Boðsbréf vegna heimsóknar

## Invitation letter for visitors

- Fyllist út af einstaklingi á Íslandi (gestgjafa) sem vill bjóða ættingja eða vini í heimsókn til Íslands.
- Gestgjafi sendir umsækjanda útfyllt og undirritað boðsbréf í frumriti.
- Umsækjandi leggur boðsbréfið fram ásamt öðrum fylgiskjölum þegar sótt er um áritun.

VINSAMLEGAST HLADIÐ EYÐUBLADINU NIÐUR,  
VISTIÐ Á TÖLVU OG Fyllið síðan út Á ENSKU

- To be filled in by a person in Iceland (host) who wishes to invite a friend or relative for a visit.
- The host sends the filled and signed invitation letter in original form to the visa applicant (guest).
- The applicant submits the invitation letter and other supporting documents when applying for a visa.

PLEASE DOWNLOAD AND SAVE FORM ON  
COMPUTER BEFORE FILLING OUT IN ENGLISH

### 1. Upplýsingar um gestgjafa á Íslandi / Information about the host in Iceland

Kenninamn / Surname	Eiginnafn (-nöfn) / Given name(-s)
Heimili á Íslandi / Address in Iceland	
Kennitala / Icelandic ID number	Ríkisfang / Citizenship
Hjúskaparstaða / Marital status	
<input type="radio"/> ógift(-ur) / single <input type="radio"/> gift(-ur) / married <input type="radio"/> ekkja(ekkill) / widow(-er) <input type="radio"/> skilin(-n) að borði og sæng / separated <input type="radio"/> fráskilin(-n) / divorced <input type="radio"/> sambúð / cohabitation	
Símanúmer / Telephone number	Netfang / E-mail address

### 2. Upplýsingar um umsækjanda um vegabréfsáritun / Information on the visa applicant (guest)

Kenninamn / Surname	Eiginnafn (-nöfn) / Given name(-s)
Fæðingardagur (dd/mm/áá) / Date of birth (dd/mm/yy)	Kyn (eins og skráð er í vegabréfi) / Gender (as registered in passport) <input type="radio"/> karl / male <input type="radio"/> kona / female
Ríkisfang / Citizenship	
Hjúskaparstaða / Marital status	
<input type="radio"/> ógift(-ur) / single <input type="radio"/> gift(-ur) / married <input type="radio"/> ekkja(ekkill) / widow(-er) <input type="radio"/> skilin(-n) að borði og sæng / separated <input type="radio"/> fráskilin(-n) / divorced <input type="radio"/> sambúð / cohabitation	
Heimilisfang í heimalandi / Address in home country	
Símanúmer / Telephone number	Netfang / E-mail address
<b>Nánari upplýsingar um umsækjanda / Further information about the applicant</b>	
Nafn maka umsækjanda (ef við á) / Name of the applicant's spouse/partner (if applicable)	
Er umsækjandi í vinnu? / Is the applicant employed? <input type="radio"/> Já / Yes <input type="radio"/> Nei / No	Ef já, við hvað vinnur hann/hún? / If yes, what is his/her profession/occupation?



# UTL

# ÚTLENDINGASTOFNUN

DIRECTORATE OF IMMIGRATION

Nafn vinnuveitanda / <i>Employer's name</i>		
Hvenær byrjaði umsækjandi í núverandi starfi? / <i>When did the applicant start his current employment?</i>		
Ef umsækjandi er í vinnu, hefur hann/hún skriflega staðfestingu á leyfi fyrir tímabil ferðarinnar? <i>If employed, does the applicant have a confirmation in writing for a leave of absence for the trip?</i>	<input type="radio"/> Já Yes	<input type="radio"/> Nei No
Ef umsækjandi er í skóla, er hann/hún að ferðast í skólaleyfi? <i>If the applicant is attending school, is he/she travelling during school holidays/break?</i>	<input type="radio"/> Já Yes	<input type="radio"/> Nei No
<b>Ferðaáætlun / <i>Details of the visit</i></b>		
Hvenær og hversu lengi mun umsækjandi heimsækja þig á Íslandi? / <i>When and for how long will the applicant be visiting you in Iceland?</i>		
Hver er ástæða heimsóknarinnar? / <i>What is the purpose of the visit?</i>		
Mun umsækjandi gista hjá þér í heimahúsi? <i>Will the applicant be staying at your home during the visit?</i>	<input type="radio"/> Já Yes	<input type="radio"/> Nei No
Ef ekki, hvar mun umsækjandi dvelja? / <i>If not, where will the applicant be staying?</i>		
Eru aðrir einstaklingar að ferðast með umsækjanda? <i>Are there any other persons travelling with the applicant that you are inviting?</i>	<input type="radio"/> Já Yes	<input type="radio"/> Nei No
Ef já, hvað heita þeir / <i>If yes, please list their names</i>		
<b>Upplýsingar um tengsl gestgjafa við umsækjanda / <i>Information on the host's relationship with the applicant</i></b>		
Er umsækjandi skyldur þér? <i>Is the applicant related to you?</i>	<input type="radio"/> Já Yes	<input type="radio"/> Nei No
Ef já, hvernig? Vinsamlegast látið fylgja staðfestingu á skyldleika / <i>If yes, how? Please submit any proof of a family relationship</i>		
Ef þið eruð ekki skyld, hvernig þekktist þið? / <i>If you are not related, how do you know each other?</i>		
Hvað hafið þið þekkt lengi? / <i>How long have you known each other?</i>		
Ef umsækjandi er unnusti þinn/unnusta þín, hafið þið hist? <i>If the applicant is your girlfriend/boyfriend or fiancé, have you met in person?</i>	<input type="radio"/> Já Yes	<input type="radio"/> Nei No
Ef svo er, hvar og hvenær hafið þið hist? (Ef hægt er, sannið það t.d. með myndum) <i>If so, where and when have you met? (Submit proof of this if possible, e.g. photos)</i>		
<b>Upplýsingar um kostnað vegna heimsóknarinnar / <i>Information on costs in relation to the visit</i></b>		
Hver greiðir fyrir ferðakostnað umsækjanda? <i>Who is paying for the applicant's travel expenses?</i>	<input type="radio"/> Umsækjandi Applicant	<input type="radio"/> Gestgjafi Host
Hver ber ábyrgð á kostnaði við dvöl umsækjanda? <i>Who is financially responsible for the applicant during the stay?</i>	<input type="radio"/> Umsækjandi Applicant	<input type="radio"/> Gestgjafi Host
Ef gestgjafi ábyrgist kostnað umsækjanda, vinsamlega skilið inn <a href="#">ábyrgðaryfirlýsingu</a> . <i>If the host is financially responsible for the applicant, please submit a <a href="#">letter of guarantee</a>.</i>		
Frekari upplýsingar varðandi boðið eða heimsóknina / <i>Any additional information concerning the invitation or visit</i>		



## Undirskrift og samþykki / Signature and consent

<input type="checkbox"/>	<p>Mér er kunnugt um og samþykki að hluti þeirra upplýsinga sem fram koma í yfirlýsingu þessari verða skráðar og geymdar í upplýsingakerfinu VIS (Visa Information System) til allt að fimm ára. Á þessu tímabili verða upplýsingarnar aðgengilegar áritanayfirvöldum og yfirvöldum bærum til að skoða áritanir á landamærum og innan Schengen aðildarríkjanna, í þeim tilgangi að staðfesta hvort skilyrði fyrir lögumatri komu og dvöl í aðildarríkjum Schengen aðildarríkjanna eru uppfyllt. Eftirfarandi upplýsingar verða skráðar í VIS: • Fullt nafn og heimilisfang gestgjafa • Skylt er að safna gögnum vegna afgreiðslu umsóknarinnar. Við tiltekna aðstæður munu tilnefnd yfirvöld aðildarríkjanna og Evrópulögreglan einnig hafa aðgang að upplýsingunum í þeim tilgangi að koma í veg fyrir, koma upp um og rannsaka hryðjuverk og aðra alvarlega, refsiverða verknæði. Yfirvaldið í aðildarríkinu, sem ber ábyrgð á vinnslu gagnanna, er: Útlendingastofnun, Dalvegi 18, 201 Kópavogi, <a href="http://www.utl.is">www.utl.is</a>.</p> <p>Mér er kunnugt um að ég á rétt á, í hvaða aðildarríki sem er, að fá tilkynningu um það hvaða gögn um mig eru skráð í upplýsingakerfið um vegabréfsáritanir og um það hvaða aðildarríki sendi gögnin, sem og á að fara fram á að röng gögn um mig séu leiðrétt og að gögnum um mig, sem unnin eru á ólögmetan hátt, sé eytt. Fari ég gagnert fram á það, munu yfirvöldin, sem annast meðferð umsóknar minnar, upplýsa mig um það hvernig ég get nýtt mér rétt minn til að skoða persónuupplýsingar um mig og láta leiðrétt þær eða eyða þeim, þ.m.t. tengd úrræði samkvæmt landslögum hlutaðeigandi ríkis. Innlent eftirlitsyfirvald þess aðildarríkis – Persónuvernd, Rauðarárstíg 10, 105 Reykjavík, <a href="http://www.personuvernd.is">www.personuvernd.is</a> – tekur kærur varðandi vernd persónuupplýsinga til meðferðar.</p> <p><i>I am aware of, and consent to, some data given in this form being entered into and stored in the Visa Information System (VIS) for a maximum period of five years. During this time it will be accessible to the visa authorities and the authorities competent to carry out checks on visas at external borders and within the Schengen Member States, for the purpose of verifying whether the conditions for the legal entry into and stay on the territory of the Member States are fulfilled. The following information will be entered into VIS: • The full name and address of the host. • The collection of the data is mandatory for the examination of the application. 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: Directorate of Immigration, Dalvegi 18, 201 Kópavogi, Iceland, <a href="http://www.utl.is">www.utl.is</a>.</i></p> <p><i>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 processing 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 – Data Protection Authority, Rauðarárstíg 10, 105 Reykjavik, Iceland, <a href="http://www.personuvernd.is">www.personuvernd.is</a> – will hear claims concerning the protection of personal data.</i></p>
<input type="checkbox"/>	<p>Ég samþykki að þetta boðsbréf megi sýna öðrum stjórnvöldum en Útlendingastofnun, án þess að það teljist brot á þagnarskyldu.</p> <p><i>I consent to this invitation letter being submitted to an administrative body other than the Directorate of Immigration, notwithstanding the provisions of the Act on Protection of Privacy.</i></p>
<input type="checkbox"/>	<p>Ég staðfesti að upplýsingar þær sem ég hef gefið séu sannar og réttar og að ekkert sé þar undanskilið.</p> <p><i>I declare that the information I have supplied is complete, true and correct.</i></p>
<input type="checkbox"/>	<p>Ég er meðvitaður um að gefi ég opinberu stjórnvaldi rangar upplýsingar geti það varðað refsingu sbr. XV. kafla almennra hegningarlaga nr. 19/1940.</p> <p><i>I am aware that giving wrong information to public authorities may be subject to penalties cf. section XV of the Icelandic Penal Code No. 19/1940.</i></p>
Staður og dagsetning / Place and date	Undirskrift gestgjafa / Signature of the host

**Specimen of Italian's form of providing proof of sponsorship and/or private accommodation**



**DICHIARAZIONE GARANZIA E/O  
ALLOGGIO**

Al sensi dell'art. 14 p.4 Codice Visti  
e dell'art. 9 p.4 Regolamento VIS

**PROOF OF SPONSORSHIP AND/OR  
PRIVATE ACCOMMODATION**

According to art. 14 p.4 Visa Code  
and to art. 9 p.4 VIS Regulation

**Io Sottoscritto/a**

*I, the undersigned*

Nome/Name	
Cognome/Surname	
Data di nascita/Date of birth	Luogo di nascita/ Place of birth
Nazionalità/Nationality	
Documento di Identità/ Identity card	
Passaporto/Passport	
Permesso di soggiorno/Residence permit	
Indirizzo/ Address	
Professione/Occupation	

**Solo per le Società o Organizzazione**

*Only for Companies or Organizations*

Ragione sociale /Company Name
Sede legale /Company Address
Nome del legale rappresentante/ Legal representative
Tel: _____ email: _____

- dichiaro di voler ospitare/declare being able to accomodate:  
 presso la mia abitazione / at my abovementioned address  
 al seguente indirizzo/at the following address

Nome/Name	
Cognome/Surname	
Data di nascita/Date of birth	Luogo di nascita/ Place of birth
Nazionalità/Nationality	
Passaporto/Passport	
Indirizzo/ Address	
Professione/Occupation	
Relazione con l'invitante/ Relationship to the invitee	
per la seguente finalità/ for the following reason	
per il periodo dal/ from _____ al/ to _____	

- dichiaro di farmi carico delle sue spese di sostentamento durante il soggiorno  
*I declare being able to bear his / her living costs during the above mentioned period of stay*
- dichiaro di avere stipulato in suo nome l'assicurazione sanitaria  
*I declare to have subscribed health insurance on his / her behalf*
- (eventuale) dichiaro di aver messo a sua disposizione, a titolo di garanzia economica, sotto forma di "fideiussione bancaria" (v. allegato), in somma di € \_\_\_\_\_ presso l'Istituto bancario \_\_\_\_\_ Agenzia n. \_\_\_\_ sita in \_\_\_\_\_  
*I declare to have made available on his/her, as financial guarantee (see annex), the sum of € \_\_\_\_\_ in the following bank \_\_\_\_\_ branch \_\_\_\_\_ address \_\_\_\_\_*
- sono consapevole che, ai sensi dell'art. 7 del D. Lgs. n. 286/1998 e s.m.i., sono tenuto a comunicare all'autorità di P.S. di zona, la presenza del cittadino straniero presso la mia abitazione, entro 48 ore dalla sua entrata nel territorio italiano  
*I am aware that, in accordance with Art. 7 of Legislative Decree n. 286/1998 and subsequent modifications, I shall notify the local police headquarters of the presence of the foreign national in my home, within 48 hours from the time he / she entered Italian territory*
- sono consapevole delle responsabilità penali previste dall'art. 12 del D. Lgs. n. 286/98 e s.m.i.  
*I am aware of the penal responsibilities foreseen by art. 12 of Legislative Decree n. 286/1998 and subsequent modifications.*

Sono informato del fatto e accetto che i dati forniti con il presente modulo sono obbligatori per l'esame della domanda di visto e che essi saranno comunicati alle autorità competenti degli Stati membri e trattati dalle stesse, ai fini dell'adozione di una decisione in merito alla domanda.

Tali dati saranno inseriti e conservati nel sistema d'informazione visti (VIS) per un periodo massimo di cinque anni, durante il quale essi saranno accessibili alle autorità competenti per i visti, alle autorità competenti in materia di controlli ai valichi di frontiera esterne alle autorità competenti a controllare all'interno degli Stati membri se siano soddisfatte le condizioni d'ingresso, di soggiorno o di residenza nel territorio degli Stati membri alle autorità competenti in materia di asilo ai fini della determinazione dello Stato membro competente per l'esame di una domanda di asilo e/o ai fini dell'esame di una domanda di asilo.

A determinate condizioni, i dati saranno anche accessibili alle autorità designate degli Stati membri ed a Europol ai fini della prevenzione, dell'individuazione e dell'investigazione di reati di terrorismo e altri reati gravi.

Le autorità italiane di controllo sul trattamento dei dati personali di cui all'articolo 41 par. 4 del Reg. CE n. 767/2008 sono il Ministero degli Affari Esteri ed il Ministero dell'Interno.

Sono informato/a del diritto di accesso ai dati relativi alla mia persona registrati nel VIS e del diritto di chiedere che dati inesatti relativi alla mia persona vengano rettificati e che quelli relativi alla mia persona trattati illecitamente vengano cancellati.

L'autorità italiana di controllo nazionale di cui all'art. 41 par. 1 del Reg. CE n. 767/08 è il Garante per la protezione dei dati personali sito in Piazza di Monte Citorio n. 121 00186 Roma.

Dichiaro che a quanto mi consta tutti i dati da me forniti sono completi ed esatti. Sono consapevole delle responsabilità penali in caso di false dichiarazioni, così come espressamente stabilito dall'art. 76 del D.P.R. n. 445/2000.

I am aware of and consent to the following: the data provided within this declaration are mandatory and will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on the visa application.

Such data 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; the authorities competent for carrying out checks on visas at external borders; to the immigration 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; to the asylum authorities in the Member States for the purposes 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 Italian authorities responsible for processing the data according to art. 41 p. 4 of Reg. CE n. 767/2008 are: Ministry of Foreign Affairs and Ministry of Interior.

I am aware that I have the right to obtain notification of the data relating to me recorded in the VIS and to request that data relating to me which are inaccurate be corrected and that data relating to me processed unlawfully be deleted.

The Italian national supervisory authority according to art. 41 p.1. of Reg. CE n. 767/08 is the Data Protection Authority based in Piazza di Monte Citorio, 121 - 00186 Rome.

I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that making false statements is punishable by law (see art. 76 D.P.R. n. 445/2000).

**Luogo e data / Place and date:**

**Firma/ Signature**

**Allegati/ Annexes:**

- documento d'identità dell'invitante/ identity card of the person issuing the invitation
- fideiussione bancaria / financial guarantee
- altri documenti/ other documents.

Specimen of Republic of Latvia's form of providing proof of sponsorship and/or private accommodation



## Ielūgums vīzas pieprasīšanai / Invitation for Requesting a Visa

Nr. R2702-000004

1. Ielūguma pieprasījums saņemts (datums un vieta) Request for invitation received (date and place)	03.11.2025, PMLP MIGRĀCIJAS NODALA
2. Statuss Status	APSTIPRINĀTS APPROVED
3. Derīgs līdz Valid until	03.05.2026
4. Vīzas pieprasījuma iesniegšanas vieta Place for submission of visa application	UNGĀRIJAS REP. VĒSTN. ALŽĪRĀ (ALŽĪRIJA) EMBASSY OF HUNGARY IN ALGIERS (ALGERIA)
5. Ieceļošanas mērķis Purpose of entry	KOMERCIĀLA DARBĪBA / COMMERCIAL ACTIVITY

7. Dati par uzaicinātāju (juridiska persona) / Information on inviter (legal person)		
Nosaukums Name of the company	Reģistrācijas numurs Registration number	Tālruna numurs, e-pasta adrese, kontaktpersona Phone number, e-mail address, contact person
SIA "KROSS"	40203116328	+371 23232323, SIENAZI@GMAIL.COM, SIENAZIS ANDREW

8. Uzaicinātājs uzņemas segt izdevumus, kas saistīti ar uzaicināto ārzemnieku ieceļošanu un uzturēšanos Latvijas Republikā The inviter assumes to cover the expenses of the invited person/persons' related to the entry and stay in the Republic of Latvia	NE/NO
9. Uzaicinātājs nodrošina uzaicināto ārzemnieku izmitināšanu The inviter provides the accommodation of the invited persons	NE/NO

10. Dati par uzaicinātajām personām / Information on invited person/s	
Uzvārds, vārds / Pašreizējā valstiskās piederības valsts un statuss / Dzimšanas datums un vieta / Dzīvesvietas adrese / Uzturēšanās vieta Surname and first name / Current nationality and status / Date and place of birth / Address of the place of residence / Place of stay	Informācija par pieprasāmo vīzu (vīzas veids un derīguma termiņš, uzturēšanās laiks / ieceļošanas mērķis / ielūguma derīguma termiņš) Information on requested visa (type of visa, term of validity, duration of stay / purpose of entry / invitation valid until)
01 TESTO, MESTO: DZA PILSONIS/CITIZEN; 22.10.1980 DZA ORAN; DZA ORAN, 1 OUGHLISS, RUE DES FRER OUK ELHADJ, EL MORADIA; Viesnīca, BALTĀ KAZA;	1X IECEĻOŠANAS, DIENU SKAITS, 15 d., / 1 ENTRY, 15 d.

I, the undersigned, confirm that I guarantee the conformity of the purpose(-s) of the entry and stay of the invited foreigner(-s) to the purpose(-s) stated in the submitted documents for the visa application and I undertake the responsibility on his/ her departure from the country within a specified time and, if necessary, I will ensure the covering of expenses related to foreigner's health care, stay in the Republic of Latvia and return to country of domicile.

Ar savu parakstu apliecinu, ka uzņemos atbildību par uzaicinātā(-to) ārzemnieka(-u) ieceļošanas un uzturēšanās mērķa(-u) atbilstību vīzas pieprasīšanai iesniegtajos dokumentos norādītajam mērķim(-iem), par viņa(-u) izbraukšanu no valsts noteiktā laikā, kā arī, ja nepieciešams, nodrošināšu ar ārzemnieka(-u) veselības aprūpi, uzturēšanos Latvijas Republikā un atgriešanos mītnes zemē saistīto izdevumu segšanu.

I, the undersigned, confirm that I have been informed and agree that the personal data included in the request and in the invitation will be included in the Register of Invitations and processed for the purpose of a decision on the visa application of foreigner(-s) whom I have invited.

Uzaicinātājs vai viņa pilnvarota persona apliecinā, ka ir informēts(-a) un piekrīt, ka personas dati, kas iekļauti pieprasījumā un ielūgumā, tiks iekļauti Ielūgumu reģistrā un, ja nepieciešams, tiks apstrādāti, lai pieņemtu lēmumu par uzaicinātā(-o) ārzemnieka(-u) vīzas pieprasījumu.

Sienazis Andrew

Uzaicinātāja/pilnvarotās personas vārds, uzvārds, paraksts  
First name, surname, signature of inviter/authorized person

Māra Rūtiņa

Apstiprināts / Approved



(zīmogs, amatpersonas paraksts un atšifrējums)  
(stamp, official's signature, first name and surname)

03.11.2025  
(izdrukas datums)  
(date of printout)



## Ielūgums vīzas pieprasīšanai / Invitation for Requesting a Visa **SPECIMEN**

Nr. R2768-001606

1. Ielūguma pieprasījuma saņemšanas datums un vieta / Request for invitation received (date and place)	23.01.2018, PMLP MIGRĀCIJAS NODAĻA
2. Statuss / Status	APSTIPRINĀTS / APPROVED
3. Derīguma termiņš / Valid until	23.07.2018
4. Vīzas pieprasījuma iesniegšanas vieta / Place for submission of visa application	UNGĀRIJAS REP. VESTN. ALŽIRĀ (ALGERIA) / EMBASSY OF HUNGARY IN ALGIEERS (ALGERIA)
5. Ieceļošanas mērķis / Purpose of entry	PRĪVAĻA VIZĪTE / PRIVATE VISIT

6. Dati par uzacīnātāju (fiziska persona) / Information on inviter (natural person)			
Uzvārds, vārds / Surname, first name	Personas kods / Personal code	Nodarbošanās / Occupation	Tālruna numurs, e-pasta adrese / Phone number, e-mail address
PRIEDĪTE, VITA	120669-13071	SELP-EMPLOYED PERSON	+371 26155442

8. Uzacīnātājs uzņemas segt izdevumus, kas saistīti ar uzacīnāto ārvalstnieku iecelšanos un uzturēšanos Latvijas Republikā / The inviter assumes to cover the expenses of the invited person/persons related to the entry and stay in the Republic of Latvia	JĀ/YES
9. Uzacīnātājs nodrošina uzacīnāto ārvalstnieku izmitināšanu / The inviter provides the accommodation of the invited persons	JĀ/YES

10. Dati par uzacīnātajām personām / Information on invited person/s		
	Uzvārds, vārds / Pašreizējā valstiskā piederības valsts un statuss / Dzimšanas datums un vieta / Dabvēstības adrese / Uzturēšanās vieta / Surname and first name / Current nationality and status / Date and place of birth / Address of the place of residence / Place of stay	Informācija par pieprasīamo vīzu (vīzas veids un derīguma termiņš, uzturēšanās laiks / Ieceļošanas mērķis / Ielūguma derīguma termiņš) / Information on requested visa (type of visa, term of validity, duration of stay / purpose of entry / invitation valid until)
01	KHEBADJE, ZAKARIA / DZA PILSONIS/CITIZEN; 12.12.1974 DZA ORAN; DZA ORAN, LILIE AV 100, Vīzmanis, PARK HOTEL, SĻOKAS IELA 40, RĪGA, LV-1004, LATVIJA	1X ICEĻOŠANAS, DIENU SKAITS - 30 d., KOPĀ / 1 ENTRY, 30 d., TOTAL
02	JADDINI, RAMI / DZA PILSONIS/CITIZEN; 01.02.2013 USA BOSTON; DZA ORAN, LILIE AV 100; Vīzmanis, PARK HOTEL, SĻOKAS IELA 40, RĪGA, LV-1004, LATVIJA	1X ICEĻOŠANAS, DIENU SKAITS - 30 d., KOPĀ / 1 ENTRY, 30 d., TOTAL

I, the undersigned, confirm that I guarantee the conformity of the purpose(s) of the entry and stay of the invited foreigner(s) to the purpose(s) stated in the submitted documents for the visa application and I undertake the responsibility on his/ her departure from the country within a specified time and, if necessary, I will ensure the covering of expenses related to foreigner's health care, stay in the Republic of Latvia and return to country of domicile.

Ar savu parakstu apliecinu, ka garantēju atbilstību pieprasītajam ielūguma mērķim un uzņemu atbildību par uzacīnātā(-u) ārvalstniek(-u) iecelšanos un uzturēšanos mērķi (u) noteiktā termiņā un, ja nepieciešams, nodrošināšu ar ārvalstniek(-u) veselības aprūpi, uzturēšanos Latvijā (Latvijas Republikā) un atgriešanos mājās zem noteiktā izdevumu seguma.

I, the undersigned, confirm that I have been informed and agree that the personal data included in the request and in the invitation will be included in the Register of Invitations and processed for the purpose of a decision on the visa application of foreigner(s) whom I have invited.

Uzacīnātāji vai viņu pilnvarotā persona apliecinu, ka informē(-a) un piekrīti, ka personālie dati, kas iekļauti pieprasījumā un ielūgumā, tiks iekļauti ielūgumu reģistrā un, ja nepieciešams, tiks apstrādāti, lai pieņemtu lēmumu par uzacīnātā(-u) ārvalstniek(-u) vīzas pieprasījumu.

Ielūdzēja/pilnvarotās personas vārds, uzvārds, paraksts  
First name, surname, signature of inviter/authorized person

Apstiprināts / Approved



*Līga Cerbule*  
\_\_\_\_\_  
(zināms, amatpildītāja paraksts un atbilstīgums)  
(stamp, official's signature, first name and surname)

25.01.2018  
(atbilstoša datums)  
(date of printing)

**SPECIMEN**



Ielūgums vīzas pieprasīšanai / Invitation for Requesting a Visa

**SPECIMEN**

Nr. R2768-001607

1. Ielūguma pieprasījums saņemts (datums un vieta) Request for invitation received (date and place)	23.01.2018, PMI.P MIGRĀCIJAS NODAĻA
2. Statuss Status	APSTIPRINĀTS APPROVED
3. Derīgs līdz Valid until	23.07.2018
4. Vīzas pieprasījuma iesniegšanas vieta Place for submission of visa application	VĀCIJAS FR. VĒSTN. ISLAMABADĀ (PAKISTĀNA) EMBASSY OF GERMANY IN ISLAMABAD (PAKISTAN)
5. Iecelšanās mērķis Purpose of entry	KOMERCIĀLA DARĪBUJA / COMMERCIAL ACTIVITY KONFERENCE / SEMINĀRS / CONFERENCE / SEMINAR

7. Dati par uzaicinātāju (juridiska persona) / Information on inviter (legal person)		
Nosaukums Name of the company	Reģistrācijas numurs Registration number	Tālruna numurs, e-pasta adrese, kontaktpersona Phone number, e-mail address, contact person
SABIEDRĪBA AR IERODEŽOTU ATBILDĪBU "WORLD OF WORLD"	41513054051	+371 20202022, ČĀLIS ARTŪRS

8. Uzdevinātājs uzņemas segt izdevumus, kas saistīti ar uzaicināto ārvalstnieku ieeļļošanu un uzturēšanos Latvijā (Republikā)	JĀ/VĒS
9. Uzdevinātājs nodrošina uzaicināto ārvalstnieku izmīdināšanu	NEĒMŅ

10. Dati par uzaicinātajām personām / Information on invited persons	
Uzvārds, vārds / Pabeigto valstiskās piederības valsts un statuss / Dzimšanas datums un vieta / Dzīvotāju adrese / Uzturēšanās vieta Surname and first name / Current nationality and status / Date and place of birth / Address of the place of residence / Place of stay	Informācija par pieprasāmo vīzu (vīzas veids un derīguma termiņš, uzdevinātāja mērķis / Ielūguma derīguma termiņš) Information on requested visa (type of visa, term of validity, duration of stay / purpose of entry / invitation valid until)
01. FAYAZ, AHMED HUSSEIN, PAK. PILSONĪBĀTIZEN, 01.06.1964 PAK KARACHI, PAK KARACHI, DOWN TOWN STREET 122, Viesnīca, HOTEL ELEPHANT, KĀLU IELA 40, RĪGA, LV-1029, LATVIJA	DAUDZKĀRT. IECĒĻOŠANAS, TERMIŅŠ NO - LĪDZ, 01.05.2018 - 30.04.2019, 90 d., 6 MĒNEŠU LAIKĀ / MULT. ENTRIES, THRU 01.05.2018 - 30.04.2019, 90 d. WITHIN HALF A YEAR
02. SATTAR KASA, AMIR ALI, PAK. PILSONĪBĀTIZEN, 05.05.1978 PAK LAHORE, PAK LAHORE, BOUND STREET, Viesnīca, HOTEL ELEPHANT, KĀLU IELA 40, RĪGA, LV-1029, LATVIJA	DAUDZKĀRT. IECĒĻOŠANAS, TERMIŅŠ NO - LĪDZ, 01.05.2018 - 30.04.2019, 90 d., 6 MĒNEŠU LAIKĀ / MULT. ENTRIES, THRU 01.05.2018 - 30.04.2019, 90 d. WITHIN HALF A YEAR

I, the undersigned, confirm that I guarantee the conformity of the purpose(s) of the entry and stay of the invited foreigner(s) to the purpose(s) stated in the submitted documents for the visa application and undertake the responsibility on his/ her departure from the country within a specified time and, if necessary, I will ensure the covering of expenses related to foreigner's health care, stay in the Republic of Latvia and return to country of domicile.

Ar savu parakstu apliecinu, ka uzņemos atbildību par uzaicinātā(-to) ārvalstnieka(-u) ieeļļošanu un uzturēšanās mērķa(-u) atbilstību vīzas pieprasīšanai iesniegtajās dokumentātajās informācijās (iesniegumā) uzdevinātāja nosaukuma un adreses ziņojumiem, ja nepieciešams, nodrošināšu ar ārvalstnieka(-u) veselības aprūpi, uzturēšanos Latvijā (Republikā) un atgriešanos mājās zemā minēto derīgumu termiņā.

I, the undersigned, confirm that I have been informed and agree that the personal data included in the request and in the invitation will be included in the Register of Invitations and processed for the purpose of a decision on the visa application of foreigner(s) whom I have invited.

Uzaicinātājs vai viņa pilnvarotā persona apliecinās, ka ir informēts(-a) un piekriš, ka personas dati, kas iekļauti pieprasījumā un ielūgumā, tiks iekļauti ielūgumu reģistrā un ja nepieciešams, tiks apstrādāti, lai pieņemtu lēmumu par uzaicinātā(-o) ārvalstnieka(-u) vīzas pieprasījumu.

Ielūguma pieprasītāja personas vārds, uzvārds, paraksts  
First name, surname, signature of invited/authorized person

Apstiprināts / Approved



V. Priedite

(Zīmogs, amatpersonas paraksts un atbilde)  
(Stamp, official's signature, first name and surname)

25.01.2018  
(Ielūguma datums)  
(date of invitation)

**SPECIMEN**

**Specimen of Liechtenstein's form of providing proof of sponsorship and/or private accommodation**



MIGRATION AND PASSPORT OFFICE  
PRINCIPALITY OF LIECHTENSTEIN

N° ORBIS 4  
N° ORBIS 5  
N° ORBIS 6  
N° ORBIS 7

N° ORBIS 8  
N° ORBIS 9  
N° ORBIS 10

1/1



## Extension page Formal undertaking

[Art. 7 to 9 Ordinance on Entry and Visa Issue (VEV), Liechtenstein Law Gazette (LGBl.) 2011 No. 572]

Please make sure you carefully read the notes overleaf or on the following page. Please use a blue or black ballpoint pen and fill out the form in CAPITAL LETTERS.

### 1. Visitor (subject of guarantee)

Name:	4	5	6
First name(s):	4	5	6
Date of birth: (day/month/year)	4	5	6
Nationality(-ies):	4	5	6
Street, no.:	4	5	6
Postcode, town, country:	4	5	6

Name:	7	8	9
First name(s):	7	8	9
Date of birth: (day/month/year)	7	8	9
Nationality(-ies):	7	8	9
Street, no.:	7	8	9
Postcode, town, country:	7	8	9

Name:	10
First name(s):	10
Date of birth: (day/month/year)	10
Nationality(-ies):	10
Street, no.:	10
Postcode, town, country:	10

### 2. Guarantor (to be filled out by the invited person(s) or company and completed by the guarantor)

The guarantor:	Date:	Signature:
<input type="checkbox"/> The spouse:	Date:	Signature:
<input type="checkbox"/> The registered partner:	Date:	Signature:



MIGRATION AND PASSPORT OFFICE  
PRINCIPALITY OF LIECHTENSTEIN

SWISS DIPLOMATIC MISSION / MIGRATION AUTHORITIES / BORDER POSTS

N° ORBIS 1  
N° ORBIS 2  
N° ORBIS 3

A FOREIGN TRAVEL HEALTH INSURANCE  
TAKEN OUT BY THE GUARANTOR IN THE NAME OF  
THE VISITOR AND NORMALLY VALID FOR THE  
WHOLE OF THE SCHENGEN AREA IS REQUIRED.

1/2



YES  NO

## Formal undertaking

(Art. 7 to 9 Ordinance on Entry and Visa Issue (VEV), Liechtenstein Law Gazette (LGBL) 2011 No. 572)

Please make sure you carefully read the notes overleaf or on the following page. Please use a blue or black ballpoint pen and fill out the form in CAPITAL LETTERS.

### 1. Visitor\* (subject of guarantee)

Name:	1	2	3
First name(s):	1	2	3
Date of birth: (day/month/year)	1	2	3
Nationality(-ies):	1	2	3
Street, no.:	1	2	3
Postcode, town, country:	1	2	3

Stay planned from \_\_\_\_\_ to \_\_\_\_\_, which corresponds to \_\_\_\_\_ days.

\*For families or groups of more than three persons, but of a maximum of ten persons, the details of the other visitors shall be entered on the extension page provided.

### 2. Guarantor (to be filled out by the invited person(s) or company and completed by the guarantor)

Name/Name of company:	First name:	Date of birth:
Nationality:	Residence permit:	<input type="checkbox"/> B Permit <input type="checkbox"/> C Permit <input type="checkbox"/> D Permit
Street, no.:	Postcode, town:	

Declaration of Guarantor: I/We irrevocably undertake to meet all costs not covered for the support (including accident, illness and return journey) up to a sum of 30,000.00 Swiss francs at the charge of the competent authorities of the country, local administrations or private medical service providers resulting from the stay of the person(s) listed in Section 1 (incl. extension page). I/We agree to the conditions stated on the following page of this form.

The guarantor:	Date:	Signature:
<input type="checkbox"/> The spouse:	Date:	Signature:
<input type="checkbox"/> The registered partner:	Date:	Signature:

### 3. Statement of Migration and Passport Office (MPO)

The MPO states that in consideration of its assessment, the guarantor is able to meet the financial obligations undertaken:  
 yes  no

If a certificate for a foreign travel health insurance signed by the guarantor and taken out in the name of the person making the application has been shown (see column on the right at the top, in the middle), the MPO states that the foreign travel health insurance meets the requirements of Art. 10 Para. 1 VEV:  
 yes  no

Remarks:

Date: \_\_\_\_\_ Signature of MPO officer and stamp: \_\_\_\_\_

The formal undertaking is only valid with the official stamp and signature of the Migration and Passport Office.

#### 4. Scope of undertaking and important notes

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- The embassy responsible for the issuing of visas can demand the signed formal undertaking of a solvent natural person or juridical person (guarantor) entered in the company register in Liechtenstein for the verification of the entry requirements and the conditions of a planned visit of an alien. This formal undertaking may only be made by citizens of the Principality of Liechtenstein or Switzerland who live in one of the two states, or aliens with a valid temporary or permanent residence permit (Art. 7 Para. 3 VEV).
- The guarantor can commit himself/herself per formal undertaking for a maximum of ten persons entering or leaving the country together (Art. 8 Para. 5 VEV).
- By signing this undertaking, the guarantor undertakes to meet all costs not covered for the support including accident, illness and return journey up to a sum of 30,000.00 Swiss francs at the charge of the local communities or private medical service providers resulting from the stay of the alien (Art. 8 Para. 1 VEV), regarded as an irrevocable debt acknowledgement.
- The undertaking comes into effect on the date that the visa is issued or the date of entry (formal undertaking at the border) and ends when the alien leaves Switzerland, but no later than twelve months after the alien's entry. The costs incurred in this timeframe and not covered can be claimed for a period of five years after they have been incurred (Art. 8 Para. 3 and 4 VEV).
- The competent authorities may demand the following documents as an identity check and for the verification of the details given:
  - Identity card and residence permit;
  - extracts from the Collection and Bankruptcy Register;
  - wage slips;
  - bank account statements, and
  - tax assessment.
- The guarantor authorises the Migration and Passport Office to obtain relevant information from the Tax Administration, Regional Court, Social Services Office, local authority for place of residence and National Police (Art. 9 Para. 2 VEV).
- A positive assessment by the Migration and Passport Office concerning the formal undertaking does not constitute a right to the issue of a visa.
- No appeal can be made against a negative assessment by the Migration and Passport Office in regard to this formal undertaking. It is only possible to make a written objection against the refusal of a visa by the diplomatic mission within 30 days at the State Secretariat for Migration, Quellenweg 6, CH-3003 Bern-Wibern (Art. 13 Para. 3 VEV). The border authorities can demand a formal undertaking from aliens who do not require visas, and who are not members of an EEA state or Switzerland (Art. 7 Para. 2 VEV). The undertaking is then valid for twelve months (Art. 8 Para. 3 VEV).

#### 5. Note on foreign travel health insurance

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- In addition to the formal undertaking procedure, persons applying for a visa must prove that they hold an appropriate and valid foreign travel health insurance (Art. 10 Para. 1 VEV). The diplomatic mission does not require the conclusion of a foreign travel health insurance if the host person or the guarantor in the Principality of Liechtenstein has signed a foreign travel health insurance in the name of the person applying for a visa.
- The foreign travel health insurance must cover any costs for a return to the country of origin for medical reasons, the costs of medical treatment and/or urgent hospitalisation. Minimum cover for such costs is €30,000.00.

#### 6. Communication of personal data to third parties

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- In full knowledge of the facts, I agree that data concerning my person and stated in the formal undertaking may be communicated to third parties. These are third parties owed unpaid sums by the visa holder. The undertaking includes costs which are not covered and are charged to the public or to private service providers during the stay of the visa holder. These comprise maintenance costs including costs of illness or accident and costs for the return to the country of origin (Art. 8 Para. 1 VEV). The term "third party" applies to the authorities of the Principality of Liechtenstein, institutions of civil law, private service providers and others.

The signed form shall be sent to the Migration and Passport Office for verification. The Swiss diplomatic mission will be advised of the result of the check. Information can be obtained from the Migration and Passport Office (MPO) [Tel. +423 236 61 41] and the State Secretariat for Migration (SEM) [Tel. +41 31 325 11 11].

#### 4. Umfang der Verpflichtung und wichtige Hinweise

- Die für die Visumserteilung zuständige Botschaft kann zur Kontrolle der Einreisevoraussetzungen und der Aufenthaltsumstände einer Ausländerin oder eines Ausländers die unterzeichnete Verpflichtungserklärung einer solventen, natürlichen oder im Handelsregister eingetragenen juristischen Person (Garantin) in Liechtenstein verlangen. Diese Verpflichtung kann nur von Bürgerinnen und Bürgern des Fürstentums Liechtenstein oder der Schweiz, welche in einem der beiden Staaten wohnen oder Ausländerinnen und Ausländern mit einer gültigen Aufenthalts-, Niederlassungs- oder Daueraufenthaltsbewilligung abgegeben werden (Art. 7 Abs. 3 VEV).
- Der Garant bzw. die Garantin kann sich pro Verpflichtungserklärung für höchstens zehn gemeinsam ein- und ausreisende Personen verpflichten (Art. 8 Abs. 5 VEV).
- Mit Unterzeichnung dieser Erklärung verpflichtet sich der Garant oder die Garantin, im Sinn einer unwiderruflichen Schuld- anerkennung bis zu einem Betrag von 30'000 Schweizer Franken sämtliche ungedeckten Kosten für den Lebensunterhalt, einschliesslich Unfall und Krankheit sowie die Rückkehr zu übernehmen, die dem Gemeinwesen oder privaten Erbringern von medizinischen Dienstleistungen durch den Aufenthalt der Ausländerin oder des Ausländers entstehen (Art. 8 Abs. 1 VEV).
- Die Verpflichtung wird mit dem Datum der Visumsausstellung oder der Einreise (Verpflichtungserklärung an der Grenze) wirksam und endet mit der Ausreise der Ausländerin oder des Ausländers aus der Schweiz, jedoch spätestens zwölf Monate nach der Einreise. Die in diesem Zeitraum entstandenen ungedeckten Kosten können während fünf Jahren nach ihrer Entstehung geltend gemacht werden (Art. 8 Abs. 3 und 4 VEV).
- Die zuständigen Behörden können zur Identitätsprüfung und zur Überprüfung der Angaben insbesondere die folgenden Unterlagen verlangen:
  - Identitäts- und Ausländerausweise;
  - Auszüge aus dem Betreibungs- und Konkursregister;
  - Lohnabrechnungen;
  - Bankkontoauszüge;
  - Steuereinschätzung.
- Der Garant bzw. die Garantin ermächtigt das Ausländer- und Passamt bei der Steuerverwaltung, beim Landgericht, beim Amt für Soziale Dienste, bei der Wohnsitzgemeinde sowie bei der Landespolizei sachdienliche Auskünfte einzuholen (Art. 9 Abs. 2 VEV).
- Eine positive Stellungnahme des Ausländer- und Passamts zur Verpflichtungserklärung verleiht keinen Anspruch auf die Visumserteilung.
- Gegen eine negative Stellungnahme des Ausländer- und Passamts zu dieser Verpflichtungserklärung kann keine Beschwerde erhoben werden. Nur gegen die Visumsverweigerung der Auslandsvertretung kann innerhalb von 30 Tagen beim Staatssekretariat für Migration, Quellenweg 6, CH-3003 Bern-Wabern schriftlich Einsprache erhoben werden (Art. 13 Abs. 3 VEV). Bei nicht visumpflichtigen Ausländerinnen und Ausländern, die nicht Angehörige eines EWR-Staates oder der Schweiz sind, können die Grenzbehörden eine Verpflichtungserklärung verlangen (Art. 7 Abs. 2 VEV). Die Verpflichtung gilt dann für zwölf Monate (Art. 8 Abs. 3 VEV).

#### 5. Hinweis zur Reiseversicherung

- Unabhängig vom Verfahren der Verpflichtungserklärung muss die visumgesuchstellende Person nachweisen, dass sie Inhaberin einer zweckmässigen und gültigen Reisekrankenversicherung ist (Art. 10 Abs. 1 VEV). Die Vertretung verzichtet auf den Abschluss einer Reisekrankenversicherung, wenn die gastgebende Person oder der Garant im Fürstentum Liechtenstein eine Reisekrankenversicherung im Namen der gesuchstellenden Person unterzeichnet hat.
- Die Reisekrankenversicherung muss allfällige Kosten eines Rücktransports ins Herkunftsland aus medizinischen Gründen, die Kosten einer medizinischen Behandlung und/oder dringender Spitalbehandlungen decken. Die Minimaldeckung dieser Kosten ist € 30'000.--.

#### 6. Weitergabe von persönlichen Daten an Dritte

- In Kenntnis der Sachlage willige ich ein, dass Daten, welche ich in der Verpflichtungserklärung über meine Person angegeben habe, an Dritte weitergegeben werden dürfen. Es handelt sich dabei um Dritte, denen der Visuminhaber nicht erstattete Beträge schuldet. Die Verpflichtungserklärung umfasst nicht gedeckte Kosten, welche der Öffentlichkeit oder privaten Leistungserbringern während des Aufenthalts des Visuminhabers anfallen. Darunter fallen Unterhaltskosten inklusive Kosten für Krankheit oder Unfall sowie die Kosten für die Rückkehr (Art. 8 Abs. 1 VEV). Der Begriff „Dritte“ beinhaltet unter anderem die Behörden des Fürstentums Liechtenstein, Institutionen des öffentlichen Rechts und private Leistungserbringer.

Das unterzeichnete Formular ist zur Kontrolle an das Ausländer- und Passamt weiterzuleiten. Die schweizerische Vertretung wird über das Ergebnis der Kontrolle orientiert. Auskünfte erteilt das Ausländer- und Passamt (APA) [Tel. +423 236 61 41] und das Staatssekretariat für Migration (SEM) [Tel. +41 31 325 11 11].



AUSLÄNDER- UND PASSAMT  
FÜRSTENTUM LIECHTENSTEIN

N° ORBIS 4  
N° ORBIS 5  
N° ORBIS 6  
N° ORBIS 7

N° ORBIS 8  
N° ORBIS 9  
N° ORBIS 10

1/1



## Zusatzblatt Verpflichtungserklärung

(Art. 7 bis 9 der Verordnung über die Einreise und die Visumserteilung (VEV), LGBI. 2011 Nr. 572)

Bitte Hinweise auf der Rück- bzw. nachfolgenden Seite genau durchlesen. Bitte blauen oder schwarzen Kugelschreiber verwenden und in BLOCKSCHRIFT ausfüllen.

### 1. Besucher/in (Garonenname/n)

Name:	4	5	6
Vorname(n):	4	5	6
Geburtsdatum: (Tag/Monat/Jahr)	4	5	6
Nationalität(en):	4	5	6
Strasse, Nr.:	4	5	6
PLZ, Ort, Land:	4	5	6

Name:	7	8	9
Vorname(n):	7	8	9
Geburtsdatum: (Tag/Monat/Jahr)	7	8	9
Nationalität(en):	7	8	9
Strasse, Nr.:	7	8	9
PLZ, Ort, Land:	7	8	9

Name:	10
Vorname(n):	10
Geburtsdatum: (Tag/Monat/Jahr)	10
Nationalität(en):	10
Strasse, Nr.:	10
PLZ, Ort, Land:	10

### 2. Garant/in (Durch die eingeladenen(n) Person(en) bzw. Firma auszufüllen und durch den/die Garantin zu ergänzen)

Der Garant/in:	Datum:	Unterschrift:
<input type="checkbox"/> Der Ehegatte/-Die Ehegattin:	Datum:	Unterschrift:
<input type="checkbox"/> Der/Die eingetragene Partner/in:	Datum:	Unterschrift:

Specimen of Lithuanian's form of providing proof of sponsorship and/or private accommodation

## KVIETIMAS / INVITATION

Nr. / No. \_\_\_\_\_

### Kviečiantis asmuo: / The inviting person:

(fizinio asmens vardas (-ai), pavardė, gimimo data ir pilietybės (jei turi) valstybės kodas arba juridinio asmens pavadinimas, kodas ir juridinio

asmens vadovo ar jo įgaliojo vardas ir pavardė / the natural person's first name, surname, date of birth and country code of nationality (if any) or the legal person's name, code and first name and surname of the contact person representing the company)

(adresas ir telefono numeris / address and phone number)

### Kviečiamas asmuo: / The invited person:

(vardas (-ai) / first name)

(pavardė / surname)

(gimimo data ir vieta / date and place of birth)

(lytis / sex) (pilietybės (jei turi) valstybės kodas / country code of nationality (if any) (kelionės dokumento numeris / number of travel document)

(giminystės ar kitoks ryšys su kviečiančiu asmeniu arba atstovaujamo užsienio valstybės ūkinio subjekto pavadinimas, užsieniečio (-ės) pareigos /

family or other relationship with the inviting person or represented by the foreign entity's name, the alien's functions)

Atvykimo data / Date of arrival \_\_\_\_\_

Išvykimo data / Date of departure \_\_\_\_\_

Buvimo Lietuvoje dienų skaičius / Number of days of the stay in Lithuania \_\_\_\_\_

Atvykimo tikslas / Purpose of the arrival \_\_\_\_\_

### Užsienietis bus apgyvendintas / The alien will be accommodated

(adresas / address)

Kviečiantis asmuo įsipareigoja remti ir apgyvendinti užsienietį jo buvimo Lietuvos Respublikoje turint Šengeno vizą laikotarpiu, užtikrinti, kad užsienietis buvimo Lietuvos Respublikoje turint Šengeno vizą laikotarpiu turėtų Vizų kodekse nustatytus reikalavimus atitinkantį sveikatos draudimą, prireikus atlyginti valstybės išlaidas, patirtas dėl užsieniečio išsiuntimo iš Lietuvos Respublikos, įpareigojimo išvykti iš Lietuvos Respublikos ar grąžinimo į užsienio valstybę (įskaitant apgyvendinimo ir išlaikymo), taip pat atlyginti valstybės išlaidas, patirtas dėl užsieniečio sveikatos priežiūros. / The inviting person commits to support and accommodate the alien during his stay in the Republic of Lithuania with a Schengen visa, to ensure that the alien is in possession of health insurance in compliance with the requirements of the Visa Code during the period of stay in the Republic of Lithuania with a Schengen visa, if necessary, to cover the costs incurred by the state due to the alien's expulsion from the Republic of Lithuania, an obligation to leave the Republic of Lithuania or return to a foreign state (including accommodation and maintenance), as well as to cover the costs incurred by the state for the alien's health care.

(parašas/signature)

(fizinio asmens ar juridinio asmens vadovo ar įgaliojoto asmens vardas ir pavardė / first name and surname of the natural person, manager of the legal person or the authorised person)

(data/date)

Specimen of Luxembourg's form of providing proof of sponsorship and/  
or private accommodation

## **The current paper version (old)**

- still valid



**ENGAGEMENT DE PRISE EN CHARGE pour un court séjour au Grand-Duché de Luxembourg**  
**FORMAL OBLIGATION for a short-term visit in the Grand-Duchy of Luxembourg**

conformément aux articles 4 et 34 de la loi modifiée du 29 août 2008 sur la libre circulation des personnes et l'immigration  
in accordance with articles 4 and 34 of the amended law of 29 August 2008 on the free movement of persons and immigration

Je soussigné(e) / I, the undersigned :

1	Nom(s) / Surname(s)	
2	Prénom(s) / Given Name(s)	
3	Date de naissance / Date of birth	/ / (jour / mois / année) (day / month / year)
4	Lieu et pays de naissance / Place and country of birth	
5	Profession / Occupation	
6	Nationalité / Nationality	
7	Sexe / Sex	<input type="checkbox"/> Masculin / Male <input type="checkbox"/> Féminin / Female <input type="checkbox"/> Autre / Other
8	N° document d'identité ou titre de séjour Identity document or residence permit n°	
9	Numéro téléphone / Phone number	
10	Adresse électronique / E-mail address	
11	Adresse de résidence officielle Official residence address	Rue/Street : N° Maison / House N° : / /
		Localité/City: Code postal / Postal Code : / /

m'engage par la présente de prendre en charge les frais de séjour (y inclus les frais de santé) et de retour de :  
hereby undertake to pay the expenses for the stay (including medical costs) and return travel expenses of :

12	Nom(s) / Surname(s)	
13	Prénom(s) / Given Name(s)	
14	Date de naissance/ Date of birth	/ / (jour / mois / année) (day / month / year)
15	Lieu et pays de naissance / Place and country of birth	
16	Profession / Occupation	
17	Nationalité / Nationality	
18	Sexe / Sex	<input type="checkbox"/> Masculin / Male <input type="checkbox"/> Féminin / Female <input type="checkbox"/> Autre / Other
19	N° passeport / Passport N°	
20	Adresse au pays de résidence officielle Address in country of official residence	N° maison et rue : House n° and street : / /
		Localité/City: Code postal / Postal Code : / /
		Pays/Country :
21	Objet de séjour / Purpose of stay	
22	Durée de séjour / Duration of stay (maximum 90 jours sur période de 180 jours / maximum 90 days over a 180-days period)	/ Jours / Days
23	Relation avec le garant Relationship with the sponsor	
23	Adresse d'hébergement au Luxembourg / Host address in Luxembourg	Rue/Street : N° Maison / House N° : / /
		Localité/City: Code postal / Postal Code : / /

Par cette attestation de prise en charge, le garant s'engage à l'égard d'un étranger et de l'Etat luxembourgeois de prendre en charge les frais de séjour, y compris les frais de santé, et de retour de l'étranger pour la durée du séjour (maximum 90 jours sur une période de 180 jours). Après cette période et pendant une durée de deux ans, il est solidairement responsable avec l'étranger à l'égard de l'Etat du remboursement des frais de séjour, y compris les frais de santé, et de retour de l'étranger et doit rembourser, le cas échéant, les frais de séjour ou de rapatriement supportés par l'Etat luxembourgeois. Le garant est délié de son engagement s'il apporte la preuve que l'étranger a quitté l'Espace Schengen. **Le garant ne peut pas se désister de son engagement de prise en charge sauf** si le ministre ou son délégué accepte un nouvel engagement souscrit par une autre personne ou si le bénéficiaire de la prise en charge s'est vu attribuer une autorisation de séjour à un autre titre. Il est précisé qu'une demande de protection internationale déposée par le bénéficiaire de la prise en charge ne délie pas le garant de son engagement de prise en charge. \* *With this certificate of sponsorship, the sponsor commits to a foreign national and to the Luxembourg State to cover the costs of the foreign national's stay, including health costs, and return for the duration of the stay (maximum 90 days over a period of 180 days). After this period and for a period of two years, the sponsor is severally liable with the foreign national towards the State for the reimbursement of the costs of the foreign national's stay, including health costs, and return and must reimburse, where applicable, the costs of the stay or repatriation borne by the Luxembourg State. The sponsor is released from its commitment if it provides proof that the foreign national has left the Schengen area. **The sponsor may not withdraw his sponsorship commitment unless the Minister or his delegate accepts a new commitment from another person or if the beneficiary of the sponsorship has been granted a residence permit on another basis. It should be noted that an application for international protection submitted by the beneficiary of the sponsorship does not release the sponsor from its sponsorship commitment.** \**

Lieu / Place :	Date / Date :
Signature du garant / Signature of the sponsor :	

**Réservé à l'administration communale du lieu de résidence du garant / Legalization by the commune of residence of the sponsor**

Vu pour la légalisation de la signature du garant : \_\_\_\_\_

Fait à \_\_\_\_\_ le \_\_\_\_\_

Signature du bourgmestre ou de son délégué \_\_\_\_\_

**Réservé au Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur**

**Pour accord.**

Fait à Luxembourg, le \_\_\_\_\_

Signature du ministre ou de son délégué :

**Le garant doit rapporter la preuve qu'il dispose de ressources stables, régulières et suffisantes, sans avoir recours au système d'assistance sociale. The sponsor must prove the availability of stable, regular, and sufficient resources, without recourse to the social assistance system.**

**Documents à joindre à l'engagement de prise en charge / Documents to be attached to the letter of sponsorship :**

- une copie de la page de données du passeport/carte d'identité du garant et du titre de séjour dans le cas des ressortissants de pays tiers / *a copy of the data page of the sponsor's passport/identity card and residence permit in the case of third-country nationals ;*
- les trois dernières fiches de salaire (ou tout autre document attestant les revenus mensuels) du garant et/ou tout autre revenu mensuel complémentaire et, le cas échéant, tout justificatif d'une allocation financière / *the sponsor's last three payslips (or any other document proving monthly income) and/or any additional monthly income, and if applicable, all proof of financial allowance ;*
- une copie de la page de données du passeport de la personne prise en charge / *a copy of the data page of the passport of the person being sponsored.*

Avant tout autre démarche, le garant doit d'abord se rendre à l'administration communale de son lieu de résidence pour que le bourgmestre ou son délégué légalise sa signature. Ensuite, l'engagement de prise en charge doit être envoyé avec les documents justificatifs pour approbation au **Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur**. *Before taking any other steps, the sponsor must first go to the commune in their place of residence so that the mayor or his delegate can legalise their signature. Next, the letter of sponsorship must be sent with the supporting documents for approval to the Ministry of Foreign and European Affairs, Defence, Development Cooperation and Foreign Trade.* A cette fin, le garant envoie ce formulaire dûment rempli et légalisé par sa commune de résidence à / *To this end, the sponsor must send this form, duly completed and authenticated by the municipality of residence, to :*

**Direction des affaires consulaires et des relations culturelles internationales - Bureau des passeports, visas et légalisations**  
6, rue de l'Ancien Athénée, L-1144 Luxembourg

Lorsque l'engagement de prise en charge est approuvé, une copie conforme est remise au garant avec mention de l'avis favorable. L'étranger en faveur duquel l'engagement est pris doit en faire usage **dans les six mois** à partir de la date d'approbation. *Once the letter of sponsorship is approved, a certified copy is given to the sponsor, stating the favourable decision. The foreign national benefiting from the sponsorship must make use of it **within six months** of the date of approval.*

**Attention :** L'approbation de l'engagement de prise en charge ne constitue pas une autorisation d'entrée ou de séjour au Grand-Duché de Luxembourg et ne préjuge pas la décision qui sera prise sur la demande de visa de court séjour. *Approval of the letter of sponsorship does not constitute authorisation to enter or stay in the Grand Duchy of Luxembourg and does not prejudice the decision to be taken on the application for a short-stay visa.*

\* Les données présentes dans ce formulaire seront saisies et conservées dans le système d'information sur les visas (VIS) pendant une période maximale de cinq (5) ans, durant laquelle elles seront accessibles aux autorités chargées des visas, aux autorités compétentes chargées de contrôler les visas aux frontières extérieures et dans les Etats membres de l'UE, aux autorités compétentes en matière d'immigration et d'asile dans les Etats membres de l'UE aux fins de la vérification du respect des conditions d'entrée et de séjour réguliers sur le territoire des Etats membres, aux fins de l'identification des personnes qui ne remplissent pas ou plus ces conditions, aux fins de l'examen d'une demande d'asile et de la détermination de l'autorité responsable d'un tel examen. Sous certaines conditions, ces données seront aussi accessibles aux autorités désignées des Etats membres et à Europol aux fins de la prévention et de la détection des infractions terroristes et des autres infractions pénales graves, ainsi qu'aux fins des enquêtes en la matière. Au regard du Règlement général de la protection des données (RGPD) et du Règlement VIS, vous êtes en droit d'obtenir l'accès à vos données personnelles notamment une copie de celles-ci ainsi que l'identité de l'Etat membre qui les a transmis au VIS. Vous avez également le droit à ce que vos données personnelles qui sont inexacts ou incomplètes soient rectifiées ou complétées, que le traitement de vos données personnelles soit restreint sous certaines conditions et le traitement de vos données personnelles traitées illégalement soient effacées. Votre demande d'accès, de rectification ou d'effacement peut être adressée directement au Bureau des passeports, visas et légalisations qui est l'autorité responsable du traitement de ces données. Plus de détails sur les conditions d'exercice de ces droits, y compris connexes conformes à la législation nationale de l'Etat concerné, sont disponibles sur le site internet du MAE (<https://mae.gouvernement.lu/fr.html>) et peuvent être fournis sur demande.

**The updated paper version**



**ENGAGEMENT DE PRISE EN CHARGE pour un court séjour au Grand-Duché de Luxembourg**  
**FORMAL OBLIGATION for a short-term visit in the Grand-Duchy of Luxembourg**

conformément aux articles 4 et 34 de la loi modifiée du 29 août 2008 sur la libre circulation des personnes et l'immigration  
in accordance with articles 4 and 34 of the amended law of 29 August 2008 on the free movement of persons and immigration

Je soussigné(e) / I, the undersigned :

1	Nom(s) / Surname(s)	
2	Prénom(s) / Given Name(s)	
3	Date de naissance / Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/> (jour / mois / année) (day / month / year)
4	Lieu et pays de naissance / Place and country of birth	
5	Profession / Occupation	
6	Nationalité / Nationality	
7	N° de l'attestation d'enregistrement, du titre de séjour ou équivalent / n° of registration certificate, residence permit or equivalent	
8	Numéro téléphone / Phone number	
9	Adresse électronique / E-mail address	
10	Adresse de résidence officielle / Official residence address	Rue/Street : N° Maison / House N° : <input type="text"/>
		Localité/City: Code postal / Postal Code : <input type="text"/>

m'engage par la présente de prendre en charge les frais de séjour (y inclus les frais de santé) et de retour de :  
hereby undertake to pay the expenses for the stay (including medical costs) and return travel expenses of :

11	Nom(s) / Surname(s)	
12	Prénom(s) / Given Name(s)	
13	Date de naissance / Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/> (jour / mois / année) (day / month / year)
14	Lieu et pays de naissance / Place and country of birth	
15	Profession / Occupation	
16	Nationalité / Nationality	
17	N° passeport / Passport N°	
18	Adresse au pays de résidence officielle / Address in country of official residence	N° maison et rue : / House n° and street : <input type="text"/>
		Localité/City: Code postal / Postal Code : <input type="text"/>
		Pays/Country : <input type="text"/>
19	Objet de séjour / Purpose of stay	
20	Durée de séjour / Duration of stay (maximum 90 jours sur période de 180 jours / maximum 90 days over a 180-days period)	<input type="text"/> Jours / Days
21	Relation avec le garant / Relationship with the sponsor	
22	Adresse d'hébergement au Luxembourg / Host address in Luxembourg	Rue/Street : N° Maison / House N° : <input type="text"/>
		Localité/City: Code postal / Postal Code : <input type="text"/>

Par cette attestation de prise en charge, le garant s'engage à l'égard d'un étranger et de l'Etat luxembourgeois de prendre en charge les frais de séjour, y compris les frais de santé, et de retour de l'étranger pour la durée du séjour (maximum 90 jours sur une période de 180 jours). Après cette période et pendant une durée de deux ans, il est solidairement responsable avec l'étranger à l'égard de l'Etat du remboursement des frais de séjour, y compris les frais de santé, et de retour de l'étranger et doit rembourser, le cas échéant, les frais de séjour ou de rapatriement supportés par l'Etat luxembourgeois. Le garant est délié de son engagement s'il apporte la preuve que l'étranger a quitté l'Espace Schengen. **Le garant ne peut pas se désister de son engagement de prise en charge sauf** si le ministre ou son délégué accepte un nouvel engagement souscrit par une autre personne ou si le bénéficiaire de la prise en charge s'est vu attribuer une autorisation de séjour à un autre titre.\* *With this certificate of sponsorship, the sponsor commits to a foreign national and to the Luxembourg State to cover the costs of the foreign national's stay, including health costs, and return for the duration of the stay (maximum 90 days over a period of 180 days). After this period and for a period of two years, the sponsor is severally liable with the foreign national towards the State for the reimbursement of the costs of the foreign national's stay, including health costs, and return and must reimburse, where applicable, the costs of the stay or repatriation borne by the Luxembourg State. The sponsor is released from its commitment if it provides proof that the foreign national has left the Schengen area. **The sponsor may not withdraw his sponsorship commitment unless the Minister or his delegate accepts a new commitment from another person or if the beneficiary of the sponsorship has been granted a residence permit on another basis.**\**

Lieu / Place :	Date / Date :
Signature du garant / <i>Signature of the sponsor</i> :	

**Réservé à l'administration communale du lieu de résidence du garant / Legalization by the commune of residence of the sponsor**

Vu pour la légalisation de la signature du garant : \_\_\_\_\_  
 Fait à \_\_\_\_\_ le \_\_\_\_\_  
 Signature du bourgmestre ou de son délégué \_\_\_\_\_

**Réservé au Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur**

**Pour accord.**

Fait à Luxembourg, le  
 Signature du ministre ou de son délégué :

**Le garant doit rapporter la preuve qu'il dispose de ressources stables, régulières et suffisantes, sans avoir recours au système d'assistance sociale. *The sponsor must prove the availability of stable, regular, and sufficient resources, without recourse to the social assistance system.***

**Documents à joindre à l'engagement de prise en charge / Documents to be attached to the letter of sponsorship :**

- une copie ordinaire du passeport/carte d'identité du garant et du titre de séjour dans le cas des ressortissants de pays tiers ou de l'attestation d'enregistrement d'un citoyen de l'Union / *an ordinary copy of the sponsor's passport/identity card and a residence permit in the case of third-country nationals or registration certificate for EU citizens ;*
- les trois dernières fiches de salaire (ou tout autre document attestant les revenus mensuels) du garant et/ou tout autre revenu mensuel complémentaire et, le cas échéant, tout justificatif d'une allocation financière / *the sponsor's last three pay slips (or any other document proving monthly income) and/or any additional monthly income, and if applicable, all proof of financial allowance ;*
- une copie de la page de données du passeport de la personne prise en charge / *a copy of the data page of the passport of the person being sponsored.*

Avant tout autre démarche, le garant doit d'abord se rendre à l'administration communale de son lieu de résidence pour que le bourgmestre ou son délégué légalise sa signature. Ensuite, l'engagement de prise en charge doit être envoyé avec les documents justificatifs pour approbation au **Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur**. *Before taking any other steps, the sponsor must first go to the commune in their place of residence so that the mayor or his delegate can legalise their signature. Next, the letter of sponsorship must be sent with the supporting documents for approval to the Ministry of Foreign and European Affairs, Defense, Development Cooperation and Foreign Trade.* A cette fin, le garant envoie ce formulaire dûment rempli et légalisé par sa commune de résidence à / *To this end, the sponsor must send this form, duly completed and authenticated by the municipality of residence, to :*

**Direction des affaires consulaires et des relations culturelles internationales - Bureau des passeports, visas et légalisations**

6, rue de l'Ancien Athénée, L-1144 Luxembourg ; Tél. : 247 – 88300 ; [service.epc@mae.etat.lu](mailto:service.epc@mae.etat.lu)

Lorsque l'engagement de prise en charge est approuvé, une copie conforme est remise au garant avec mention de l'avis favorable. L'étranger en faveur duquel l'engagement est pris doit en faire usage **dans les six mois** à partir de la date d'approbation. *Once the letter of sponsorship is approved, a certified copy is given to the sponsor, stating the favourable decision. The foreign national benefiting from the sponsorship must make use of it **within six months** of the date of approval.*

**Attention :** L'approbation de l'engagement de prise en charge ne constitue pas une autorisation d'entrée ou de séjour au Grand-Duché de Luxembourg et ne préjuge pas la décision qui sera prise sur la demande de visa de court séjour. *Approval of the letter of sponsorship does not constitute authorisation to enter or stay in the Grand Duchy of Luxembourg and does not prejudice the decision to be taken on the application for a short-stay visa.*

\* Les données présentes dans ce formulaire seront saisies et conservées dans le système d'information sur les visas (VIS) pendant une période maximale de cinq (5) ans, durant laquelle elles seront accessibles aux autorités chargées des visas, aux autorités compétentes chargées de contrôler les visas aux frontières extérieures et dans les Etats membres de l'UE, aux autorités compétentes en matière d'immigration et d'asile dans les Etats membres de l'UE aux fins de la vérification du respect des conditions d'entrée et de séjour réguliers sur le territoire des Etats membres, aux fins de l'identification des personnes qui ne remplissent pas ou plus ces conditions, aux fins de l'examen d'une demande d'asile et de la détermination de l'autorité responsable d'un tel examen. Sous certaines conditions, ces données seront aussi accessibles aux autorités désignées des Etats membres et à Europol aux fins de la prévention et de la détection des infractions terroristes et des autres infractions pénales graves, ainsi qu'aux fins des enquêtes en la matière. Au regard du Règlement général de la protection des données (RGPD) et du Règlement VIS, vous êtes en droit d'obtenir l'accès à vos données personnelles notamment une copie de celles-ci ainsi que l'identité de l'Etat membre qui les a transmis au VIS. Vous avez également le droit à ce que vos données personnelles qui sont inexactes ou incomplètes soient rectifiées ou complétées, que le traitement de vos données personnelles soit restreint sous certaines conditions et le traitement de vos données personnelles traitées illégalement soient effacées. Votre demande d'accès, de rectification ou d'effacement peut être adressée directement au Bureau des passeports, visas et légalisations qui est l'autorité responsable du traitement de ces données. Plus de détails sur les conditions d'exercice de ces droits, y compris connexes conformes à la législation nationale de l'Etat concerné, sont disponibles sur le site internet du Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur (<https://mae.gouvernement.lu/fr.html>) et peuvent être fournis sur demande.

## **The digitally generated version**

- electronically signed



[REDACTED]  
L-2326 Luxembourg

Luxembourg, le 31 décembre 2025

Référence: 2025-A298-E816

Objet: Engagement de prise en charge souscrit conformément à l'article 4 de la loi modifiée du 29 août 2008 sur la libre circulation des personnes et l'immigration

Nous avons l'honneur de vous informer que l'engagement de prise en charge au nom de DIOUF Amadou né(e) le 09/11/1971 a été avisé favorablement.

Dans le cas où la personne invitée est soumise à l'obligation de visa (<https://mae.gouvernement.lu/fr/services-aux-citoyens/visa-immigration.html>), le présent engagement de prise en charge pourra être utilisé pour la demande auprès de l'ambassade compétente dans un délai de 6 mois suivant cette approbation.

Nous vous prions de bien vouloir noter que la procédure effectuée dans le cadre de cette demande d'engagement de prise en charge n'est pas une garantie que le visa sera accordé.

De plus, nous souhaitons attirer votre attention sur le fait que le garant est, avec le demandeur de visa, solidairement responsable à l'égard de l'Etat luxembourgeois du paiement des frais mentionnés à l'article 4, paragraphe (1) de la loi du 29 août 2008 sur la libre circulation et l'immigration, pendant une période de deux ans à partir du jour où le demandeur de visa est entré sur le territoire.

Nous vous prions de bien vouloir agréer, l'expression de notre parfaite considération.



**Avis aux ambassades**

Le présent engagement de prise en charge a été délivré après un examen, par le Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur, des pièces justificatives. Ces documents ont été retenus par nos services et un nouvel examen n'est plus nécessaire.



**ENGAGEMENT DE PRISE EN CHARGE pour un court séjour au Grand-Duché de Luxembourg**  
**FORMAL OBLIGATION for a short-term visit in the Grand-Duchy of Luxembourg**

conformément aux articles 4 et 34 de la loi modifiée du 29 août 2008 sur la libre circulation des personnes et l'immigration  
in accordance with articles 4 and 34 of the amended law of 29 August 2008 on the free movement of persons and immigration

**Je soussigné(e) / I, the undersigned :**

1	Nom(s) / Surname(s)	
2	Prénom(s) / Given Name(s)	
3	Date de naissance / Date of birth	/ / (jour / mois / année) (day / month / year)
4	Lieu et pays de naissance / Place and country of birth	
5	Profession / Occupation	Retraitée
6	Nationalité / Nationality	luxembourgeoise
7	N° de l'attestation d'enregistrement, du titre de séjour ou équivalent / N° of registration certificate, residence permit or equivalent	ABCD1234
8	Numéro téléphone / Phone number	+352661783629
9	Adresse électronique / E-mail address	jean.meyer@pt.lu
10	Adresse de résidence officielle Official residence address	Rue/Street : N° Maison / House N° : Localité/City: Luxembourg Code postal / Postal Code : L-2326

**m'engage par la présente de prendre en charge les frais de séjour (y inclus les frais de santé) et de retour de :**  
**hereby undertake to pay the expenses for the stay (including medical costs) and return travel expenses of :**

11	Nom(s) / Surname(s)	DIQUF
12	Prénom(s) / Given Name(s)	Amadou
13	Date de naissance / Date of birth	09/11/1971 (jour / mois / année) (day / month / year)
14	Lieu et pays de naissance / Place and country of birth	Dakar - Sénégal
15	Profession / Occupation	Joueur de football
16	Nationalité / Nationality	sénégalaise
17	N° passeport / Passport N°	SN66854LK487DS
18	Adresse au pays de résidence officielle Address in country of official residence	N° maison et rue / House n° and street : 5 Localité/City: SENEGAL Code postal / Postal Code : 10200 Pays/Country : Sénégal
19	Objet de séjour / Purpose of stay	Visite amicale
20	Durée de séjour / Duration of stay (maximum 90 jours sur période de 180 jours / maximum 90 days over a 180-days period)	35
21	Relation avec le garant Relationship with the sponsor	Ami
22	Adresse d'hébergement au Luxembourg / Host address in Luxembourg	Rue/Street : Rue Nicolas Petit N° Maison / House N° : 1 Localité/City: Luxembourg Code postal / Postal Code : L-2326

Par cette attestation de prise en charge, le garant s'engage à l'égard d'un étranger et de l'Etat luxembourgeois de prendre en charge les frais de séjour, y compris les frais de santé, et de retour de l'étranger pour la durée du séjour (maximum 90 jours sur une période de 180 jours). Après cette période et pendant une durée de deux ans, il est solidairement responsable avec l'étranger à l'égard de l'Etat du remboursement des frais de séjour, y compris les frais de santé, et de retour de l'étranger et doit rembourser, le cas échéant, les frais de séjour ou de rapatriement supportés par l'Etat luxembourgeois. Le garant est délié de son engagement s'il apporte la preuve que l'étranger a quitté l'Espace Schengen. Le garant ne peut pas se désister de son engagement de prise en charge sauf si le ministre ou son délégué accepte un nouvel engagement souscrit par une autre personne ou si le bénéficiaire de la prise en charge s'est vu attribuer une autorisation de séjour à un autre titre. *With this certificate of sponsorship, the sponsor commits to a foreign national and to the Luxembourg State to cover the costs of the foreign national's stay, including health costs, and return for the duration of the stay (maximum 90 days over a period of 180 days). After this period and for a period of two years, the sponsor is severally liable with the foreign national towards the State for the reimbursement of the costs of the foreign national's stay, including health costs, and return and must reimburse, where applicable, the costs of the stay or repatriation borne by the Luxembourg State. The sponsor is released from its commitment if it provides proof that the foreign national has left the Schengen area. The sponsor may not withdraw his sponsorship commitment unless the Minister or his delegate accepts a new commitment from another person or if the beneficiary of the sponsorship has been granted a residence permit on another basis.\**

**Organisme de contact / Contact point :**

**Direction des affaires consulaires et des relations culturelles internationales - Bureau des passeports, visas et légalisations**

6, rue de l'Ancien Athénée, L-1144 Luxembourg ; Tél. : 247 - 88300 ; service.epc@mae.etat.lu

L'étranger en faveur duquel l'engagement est pris doit en faire usage **dans les six mois** à partir de la date d'approbation. Etant donné qu'il s'agit d'un document légalisé avec signatures électroniques, le formulaire n'est valable que sous forme électronique. *The foreign national benefiting from the sponsorship must make use of it **within six months** of the date of approval. As present document is legalized with electronic signatures, only its electronic version is valid.*

**Attention :** L'approbation de l'engagement de prise en charge ne constitue pas une autorisation d'entrée ou de séjour au Grand-Duché de Luxembourg et ne préjuge pas la décision qui sera prise sur la demande de visa de court séjour. *Approval of the letter of sponsorship does not constitute authorisation to enter or stay in the Grand Duchy of Luxembourg and does not prejudice the decision to be taken on the application for a short-stay visa.*

\* Les données présentes dans ce formulaire seront saisies et conservées dans le système d'information sur les visas (VIS) pendant une période maximale de cinq (5) ans, durant laquelle elles seront accessibles aux autorités chargées des visas, aux autorités compétentes chargées de contrôler les visas aux frontières extérieures et dans les Etats membres de l'UE, aux autorités compétentes en matière d'immigration et d'asile dans les Etats membres de l'UE aux fins de la vérification du respect des conditions d'entrée et de séjour réguliers sur le territoire des Etats membres, aux fins de l'identification des personnes qui ne remplissent pas ou plus ces conditions, aux fins de l'examen d'une demande d'asile et de la détermination de l'autorité responsable d'un tel examen. Sous certaines conditions, ces données seront aussi accessibles aux autorités désignées des Etats membres et à Europol aux fins de la prévention et de la détection des infractions terroristes et des autres infractions pénales graves, ainsi qu'aux fins des enquêtes en la matière. Au regard du Règlement général de la protection des données (RGPD) et du Règlement VIS, vous êtes en droit d'obtenir l'accès à vos données personnelles notamment une copie de celles-ci ainsi que l'identité de l'Etat membre qui les a transmis au VIS. Vous avez également le droit à ce que vos données personnelles qui sont inexactes ou incomplètes soient rectifiées ou complétées, que le traitement de vos données personnelles soit restreint sous certaines conditions et le traitement de vos données personnelles traitées illégalement soient effacées. Votre demande d'accès, de rectification ou d'effacement peut être adressée directement au Bureau des passeports, visas et légalisations qui est l'autorité responsable du traitement de ces données. Plus de détails sur les conditions d'exercice de ces droits, y compris connexes conformes à la législation nationale de l'Etat concerné, sont disponibles sur le site internet du Ministère des Affaires étrangères et européennes, de la Défense, de la Coopération et du Commerce extérieur (<https://mae.gouvernement.lu/fr.html>) et peuvent être fournis sur demande.

**Specimen of Malta's form of providing proof of sponsorship  
and/ or private accommodation**



## DECLARATION OF PROOF

accomodation \*       bearing of costs \*

In accordance with Article 14(4) of the Visa Code  
for the purpose of inviting a third-country national subject to the visa obligation

### 1. the undersigned

Surname																									
Name													Place of Birth												
Nationality													Identity Card												
Id Number / Permit No													Passport No												
Date of Issue					Place of Issue																				
Address																									
Occupation																									

declare being able to accommodate\* :

1 Surname																									
Name													Place of Birth												
Nationality													Passport No												
Address																									
Relationship to the invitee																									

2 Surname																									
Name													Place of Birth												
Nationality													Passport No												
Address																									
Relationship to the invitee																									

3 From				Until			
	Days	Months	Year		Days	Months	Year



Specimen of The Netherlands form of providing proof of sponsorship and/or private accommodation



## Bewijs van garantstelling en/of particuliere logiesverstrekking

***Proof of Sponsorship and/or private accommodation  
Attestation de la personne se portant garant/se chargeant de l'hébergement d'un ressortissant étranger soumis à l'obligation de visa***

*Lees eerst de toelichting op deze pagina voordat u begint met invullen.*

Dit formulier hebt u nodig voor het uitnodigen van personen die voor hun komst naar Nederland visumplichtig zijn en aan wie u logies wenst te verstrekken. Daarnaast hebt u dit formulier nodig in geval u zich voor een visumplichtige vreemdeling garant wilt stellen.

Geef op het formulier bij 3 'Verklaring' duidelijk aan wat in uw geval van toepassing is: garantstelling, logiesverstrekking of beide.

Het door u ingevulde formulier dient voor legalisatie van uw handtekening bij de gemeente te worden aangeboden. Let op! In geval sprake is van een garantstelling dient ook de handtekening van uw partner bij de gemeente te worden gelegaliseerd. Wanneer u dit formulier gebruikt voor de komst van een persoon die niet visumplichtig is, dan hoeft u deze niet voor legalisatie van uw handtekening bij de gemeente aan te bieden.

Dit formulier dient u vervolgens te zenden naar de door u uitgenodigde persoon. Deze dient het formulier bij zijn visumaanvraag in het buitenland te overleggen, tezamen met alle overige bescheiden welke kunnen dienen ter onderbouwing van de visumaanvraag.

De gegevens die u invult op dit formulier worden opgeslagen in zowel de systemen van Nederlandse autoriteiten belast met de verwerking visumaanvragen voor kort verblijf (het nationaal VIS) als het Europese Visum Informatie Systeem (VIS). Deze gegevens kunnen met bevoegde autoriteiten worden gedeeld om de uitvoering van publieke taken beschreven in de Vreemdelingenwet 2000 op het gebied van instroom, doorstroom en uitstroom optimaal te kunnen faciliteren. Dit geschiedt onder strikte voorwaarden, binnen de daarvoor geldende wet-en regelgeving op het gebied van dataprotectie. Raadpleeg voor meer informatie over het aanvragen van een Schengenvisum kort verblijf, de wijze waarop de visumaanvraag wordt beoordeeld en wat er met uw gegevens wordt gedaan, de volgende links:

- <https://ind.nl/>
- <https://ind.nl/contact/Paginas/Verzoek-om-stukken-of-gegevens.aspx>
- <https://www.nederlandenu.nl/>
- <https://www.nederlandenu.nl/documenten/publicaties/2017/01/01/factsheet---informatie-ondersteund-beslissen>

Dit formulier is een gezamenlijke uitgave van:  
Ministerie van Justitie en Veiligheid  
Immigratie-en Naturalisatiedienst ([www.ind.nl](http://www.ind.nl))  
Ministerie van Buitenlandse Zaken ([www.minbuza.nl](http://www.minbuza.nl))

# 1 Gegevens garantsteller en/of logiesverstrekker (ondergetekende)

*Undersigned/Soussigné(e)*

1.1	Naam <i>Surname/Nom</i>	<hr/>																														
1.2	Voornamen <i>Given names/Prénoms</i>	<hr/>																														
1.3	Geboorteplaats <i>Place of birth/Lieu de naissance</i>	<hr/>																														
1.4	Geboortedatum <i>Date of birth/Date de naissance</i>	<table><thead><tr><th><i>Dag</i></th><th><i>Maand</i></th><th><i>Jaar</i></th></tr><tr><th><i>Day</i></th><th><i>Month</i></th><th><i>Year</i></th></tr><tr><th><i>Jour</i></th><th><i>Moi</i></th><th><i>Année</i></th></tr></thead><tbody><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>	<i>Dag</i>	<i>Maand</i>	<i>Jaar</i>	<i>Day</i>	<i>Month</i>	<i>Year</i>	<i>Jour</i>	<i>Moi</i>	<i>Année</i>																					
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<i>Jour</i>	<i>Moi</i>	<i>Année</i>																														
1.5	Nationaliteit <i>Nationality/Nationalité</i>	<hr/>																														
1.6	Geboorteland <i>Country of birth/Pays natal</i>	<hr/>																														
1.7	Burgerlijke staat <i>Civil status/Etat civil</i>	<input type="checkbox"/> Alleenstaand ( <i>Single/ Célibataire</i> ) <input type="checkbox"/> Gehuwd ( <i>Married/ Marié</i> ) <input type="checkbox"/> Gescheiden ( <i>Divorced/ Divorcé</i> ) <input type="checkbox"/> Weduwe/weduwenaar ( <i>Widow/widower/ Veuf</i> ) <input type="checkbox"/> Overig ( <i>Other/ Autre</i> ): <hr/>																														
1.8	Telefoonnummer <i>Phone no./Téléphone</i>	<table><tr><td> </td><td> </td></tr></table>																														
1.9	Woonadres <i>Home address/Adresse de résidence</i>	<p><i>Straat (Street/Rue)</i></p> <hr/> <p><i>Huisnummer en toevoeging (House number and suffix/Numéro en entier)</i></p> <hr/> <p><i>Postcode (Postcode/Code postal)</i></p> <table><tr><td> </td><td> </td></tr></table> <p><i>Plaats (City, Town/Ville)</i></p> <hr/> <p><i>Land (Country/Pays)</i></p> <hr/>																														
1.10	Burgerservicenummer <i>Citizen Service no./No d'identification sociale et fiscale</i>	<table><tr><td> </td><td> </td></tr></table>																														
1.11	Nummer paspoort/identiteitskaart <i>Travel document no./ No du document de voyage</i>	<hr/>																														

## 2 Gegevens huwelijkse/geregistreerde partner van ondergetekende

*Details of sponsor's spouse/registered partner / Conjoint du/de la soussigné(e)*

In geval u getrouwd bent dan wel een geregistreerd partnerschap bent aangegaan, dient voor een garantstelling tevens toestemming te worden verleend door uw huwelijkse/geregistreerde partner.

*If you are married or have entered into a registered partnership, your marital/registered partner must also grant a permission for a guarantee.*

*En cas de mariage ou de partenariat enregistré de type PACS, votre époux, épouse ou partenaire enregistré(e) devra donner son consentement à votre attestation de vous porter garant.*

- 2.1 Naam  
*Surname/Nom* \_\_\_\_\_
- 2.2 Voornamen  
*Given names/Prénoms* \_\_\_\_\_
- 2.3 Burgerservicenummer  
*Citizen Service no./No d'identification sociale et fiscale* | | | | | | | | | |
- 2.4 Nummer paspoort/identiteitskaart  
*Travel document no./ No du document de voyage* \_\_\_\_\_

verklaart toestemming te verlenen voor de garantstelling.

*declares to grant permission for the guarantee.*

*donne mon consentement à l'attestation de se porter garant.*

## 3 Verklaring

*Declaration/ Attestation*

Als ondergetekende ga ik er mee akkoord dat mijn gegevens worden ingevoerd in de systemen van Nederlandse autoriteiten belast met de verstrekking van visa kort verblijf (het nationaal VIS) en in het Europese Visum Informatie Systeem (VIS) en daar gedurende maximaal vijf jaar worden opgeslagen. Tijdens die periode zijn deze gegevens toegankelijk voor de visumautoriteiten, de autoriteiten die bevoegd zijn tot het uitvoeren van visumcontroles aan de buitengrenzen en binnen de lidstaten en immigratie- en asielautoriteiten in de lidstaten. Deze autoriteiten gebruiken de gegevens om te kunnen toetsen of is voldaan aan de voorwaarden voor legale binnenkomst en legaal verblijf op het grondgebied van de lidstaten, te kunnen vaststellen welke personen niet of niet langer aan deze voorwaarden voldoen en om een asielaanvraag te kunnen onderzoeken en te kunnen vaststellen wie belast is met dit onderzoek. Onder bepaalde voorwaarden zijn de gegevens ook beschikbaar voor de aangewezen autoriteiten van de lidstaten en voor Europol, met het oog op het voorkomen, opsporen en onderzoeken van terroristische misdrijven en andere ernstige criminaliteit. De autoriteit van de lidstaat verantwoordelijk voor de verwerking van de gegevens is: Ministerie van Buitenlandse Zaken, Directie Consulaire Zaken en Visumbeleid (DCV), Postbus 20061, 2500 EB DEN HAAG. Het ministerie van Buitenlandse Zaken.

Daarnaast ga ik ermee akkoord dat de op dit formulier vermelde gegevens, tezamen met gegevens uit andere bronnen, worden gebruikt voor informatiegestuurd werken waaronder het opstellen van profielen om bevoegde autoriteiten in staat te stellen de publieke taak op het gebied van instroom, doorstroom en uitstroom van vreemdelingen in Nederland optimaal te faciliteren.

Het is mij bekend dat ik het recht heb om van een lidstaat te verlangen dat mij wordt medegedeeld welke gegevens over mij in het Europese VIS zijn opgeslagen en welke lidstaat deze gegevens naar het VIS heeft verzonden, als ook welke gegevens over mij in de systemen van Nederlandse autoriteiten belast met de verwerking visumaanvragen voor kort verblijf zijn opgeslagen en dat ik het recht heb te verlangen dat onjuiste gegevens over mij worden gecorrigeerd en dat onrechtmatig verwerkte gegevens over mij worden vernietigd. Op mijn uitdrukkelijk verzoek zal de autoriteit die mijn aanvraag onderzoekt, mij in kennis stellen van de wijze waarop ik mijn recht tot controle van mijn persoonsgegevens kan uitoefenen en deze gegevens kan doen

verbeteren of vernietigen, met inbegrip van de daarmee verband houdende maatregelen krachtens de nationale wetgeving van de betrokken lidstaat. Bij de nationale toezichthoudende autoriteit van die lidstaat kan een verzoek worden ingediend met betrekking tot de bescherming van persoonsgegevens. Voor Nederland is dit: Autoriteit Persoonsgegevens, Postbus 93374, 2509 AJ DEN HAAG.

Het is mij bekend dat in het geval ik dit formulier niet naar waarheid invul, ik mij mogelijk schuldig maak aan een strafbaar feit, zoals valsheid in geschrifte (strafbaar gesteld in artikel 225 Wetboek van Strafrecht). Er kan aangifte tegen mij worden gedaan.

As the undersigned, I agree that my data will be entered into the systems of the Dutch authorities responsible for issuing short-stay visas (the national VIS) and the European Visa Information System (VIS) and stored there for a maximum of five years. During that period, this data is accessible to the visa authorities, the authorities competent to carry out visa checks at the external borders and within the Member States and immigration and asylum authorities in the Member States. These authorities use the data to verify whether the conditions for legal entry and residence on the territory of the Member States have been met, to determine which persons do not or no longer meet these conditions and to examine an asylum application and be able to determine who is in charge of this investigation. Under certain conditions, the data is also available to the designated authorities of the Member States and to Europol for the purposes of prevention, detection and investigation of terrorist offenses and other serious offences. The authority of the Member State responsible for the processing of the data is: Ministry of Foreign Affairs, Consular Affairs and Visa Policy Department (DCV), PO Box 20061, 2500 EB THE HAGUE. The Ministry of Foreign Affairs.

In addition, I agree that the data provided on this form, together with the data from other sources, will be used for information-driven work, including profiling to enable competent authorities to fulfil the public task of inflow, throughput and outflow of to optimally facilitate foreign nationals in the Netherlands.

I am aware that I have the right to require a Member State to be informed of what data about me is stored in the European VIS and which Member State has transmitted this data to the VIS, as well as what data about me in the systems of Dutch authorities in charge of processing short-stay visa applications have been saved and that I have the right to request that incorrect data about me be corrected and that unlawfully processed data about me is destroyed. At my express request, the authority examining my application will inform me of how I can exercise my right to control my personal data and have it corrected or destroyed, including the related measures under the national law of the Member State concerned. A request regarding the protection of personal data may be submitted to the national supervisory authority of that Member State. For the Netherlands this is: Dutch Data Protection Authority, PO Box 93374, 2509 AJ THE HAGUE.

I am aware that in the event that I do not fill out this form truthfully, I may be guilty of a criminal offence, such as forgery in writing (punishable by Article 225 of the Criminal Code). I can be reported.

Je soussigné (e), accepte que mes données soient introduites dans les systèmes des autorités néerlandaises chargées de la délivrance des visas de court séjour (le VIS national) et dans le système européen d'information sur les visas (VIS) et y soient conservées pendant une période maximale de cinq ans. Au cours de cette période, ces données seront accessibles aux autorités chargées des visas, aux autorités chargées des contrôles des visas aux frontières extérieures et à l'intérieur des États membres, ainsi qu'aux autorités des États membres chargées de l'immigration et de l'asile. Ces autorités utilisent les données pour vérifier que les conditions d'entrée et de séjour légaux sur le territoire des États membres sont remplies, pour identifier les personnes qui ne remplissent pas ou plus ces conditions et pour pouvoir examiner une demande d'asile et déterminer qui est chargé de cette enquête. Sous certaines conditions, les données sont également accessibles aux autorités désignées des États membres et à Europol aux fins de prévention et de détection des activités terroristes et autres infractions graves, ainsi que des enquêtes en la matière. L'autorité de l'État membre responsable du traitement des données est : Le ministère des Affaires étrangères, Direction des affaires consulaires et de la politique des visas (DCV), Postbus 20061, 2500 EB LA HAYE. Le ministère des Affaires étrangères.

En outre, je suis d'accord pour que les données figurant dans le présent formulaire, ainsi que les données provenant d'autres sources, soient utilisées pour des actions à visée d'informations, y compris l'établissement de profils permettant aux autorités compétentes de remplir leur mission de service public en matière d'afflux, de transit et de sortie des étrangers aux Pays-Bas.

Je sais que j'ai le droit d'exiger d'un État membre qu'il me communique les données me concernant qui sont stockées dans le VIS européen, de savoir quel est l'État membre qui les a transmises au VIS, si des données me concernant sont également stockées dans les systèmes des autorités néerlandaises chargées du traitement des demandes de visa de court séjour et que j'ai le droit de demander que des données incorrectes me concernant soient corrigées et que des données traitées illégalement soient détruites. À ma demande expresse, l'autorité qui examine ma demande m'informerait de la manière dont je peux exercer mon droit de vérifier mes données à caractère personnel et faire en sorte que ces données soient améliorées ou détruites, y compris les mesures connexes prises en vertu de la législation nationale de l'État membre concerné. Une demande de protection des données à caractère personnel peut être soumise à l'Autorité de surveillance nationale de cet État membre. Pour les Pays-Bas, il s'agit de : Autoriteit Persoonsgegevens, Postbus 93374, 2509 AJ LA HAYE.

Je suis conscient que si je ne remplis pas ce formulaire honnêtement, je peux être coupable d'une infraction pénale, telle que la falsification par écrit (punissable par l'article 225 du Code pénal). Je peux être signalé.

**3.A** Ik verklaar hierbij de onder **4** genoemde vreemdeling **logies** te verstrekken

*I herewith undertake to provide the foreign national as specified under **4** with accommodation*

*Je déclare me charger de l'hébergement de la personne nommée sous **4***

> *Kruis aan (Please tick/Veuillez cocher)*

**Ja** Yes/Oui

**Nee** No/Non

3.1 Wat is de reden voor uitnodigingen logiesverstrekking?

*Why have you undertaken to sponsor*

*the foreign national in question and provide them with accommodation? /*

*Raisons de l'invitation et de l'hébergement de la personne concernée*

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3.2 Verblijfsduur van het bezoek  
*How long will the visit take? /*  
*Durée de la visite*

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Dagen (*Days/Assigner*)

Weken (*Weeks/ Les semaines*)

Maanden (*Months/Les mois*)

3.3 Wat is de verwantschap/relatie tot de visumaanvrager?

*In what way are you related to/*

*connected with the visa applicant? /*

*Lien (familial ou non) avec la personne concernée*

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*In geval u namens een organisatie of bedrijf de onder **4** vermelde persoon uitnodigt, gelieve de volgende gegevens te verstrekken:*

*In case you invite the person mentioned under **4** on behalf of an organization or company, please provide the following information:*

*Si vous invitez la personne mentionnée au point **4** au nom d'une organisation ou d'une entreprise, veuillez fournir les informations suivantes:*

*Naam bedrijf/organisatie/Name of corporation/Nom de la société/ de l'organisation*

*Adres/ Address/Adresse*

---

*Straat (Street/Rue)*



## 4 Visumplichtige vreemdeling

*Foreign national who requires a visa/Personne soumise à l'obligation de visa*

4.1 Naam  
*Surname/Nom* \_\_\_\_\_

4.2 Voornamen  
*Given names/Prénoms* \_\_\_\_\_

4.3 Geboortedatum  
*Date of birth/Date de naissance*

<i>Dag</i>	<i>Maand</i>	<i>Jaar</i>					

4.4 Huidige nationaliteit  
*Current nationality/Nationalité actuelle* \_\_\_\_\_

4.5 Nationaliteit bij geboorte  
*Nationality at birth/Nationalité à la naissance* \_\_\_\_\_

4.6 Geboorteland  
*Country of birth/Pays natal* \_\_\_\_\_

4.7 Burgerlijke staat  
*Civil status/Etat civil*

- Alleenstaand (*Single/ Célibataire*)
- Gehuwd (*Married/ Marié*)
- Gescheiden (*Divorced/ Divorcé*)
- Weduwe/weduwenaar (*Widow/widower/ Veuf*)
- Overig (*Other/ Autre*):

\_\_\_\_\_

4.8 Woonadres  
*Home address/Adresse de résidence*

*Straat (Street/Rue)* \_\_\_\_\_

*Huisnummer en toevoeging (Number/Numéro)* \_\_\_\_\_

*Postcode (Postcode/Code postal)* \_\_\_\_\_

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*Plaats (City, Town/Ville)* \_\_\_\_\_

*Land (Country/Pays)* \_\_\_\_\_

## 5 Ondertekening

*Signature/Signature*

**De ondertekening moet plaatsvinden in het bijzijn van een bevoegd ambtenaar van de gemeente**

**The document must be signed in the presence of an authorised municipal officer**

**La signature doit être placée en présence d'un fonctionnaire municipal compétent**

- ✓ Ik verklaar het formulier naar waarheid te hebben ingevuld

*I declare I have completed the form truthfully*

*Je déclare avoir rempli le formulaire honnêtement*

5.1 Plaats  
*City, Town/Ville*

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5.2 Datum  
*Date/Date*

*Dag Maand Jaar*  
*Day Month Year*  
*Jour Mois Année*

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5.3 Handtekening logiesverstrekker/  
garantsteller  
*Signature of host/sponsor /*  
*Signature de la personne se portant*  
*garant/se chargeant de l'hébergement*

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5.4 Handtekening partner in geval tevens  
sprake is van garantstelling  
*Signature of spouse/registered partner*  
*of host/sponsor /*  
*Signature du conjoint de la personne se*  
*portant garant/se chargeant de*  
*l'hébergement*

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**Onderstaande ruimte vult alleen de gemeente in**

5.5 Legalisatie gemeente

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5.6 Gezien voor legalisatie van de  
handtekening van

---

5.7 Namens de Burgemeester van de  
gemeente

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Specimen of Norwegian's form of providing proof of sponsorship and/or private accommodation

# Sponsorskjema

## Proof of sponsorship and/or of private accommodation

### Disse skal bruke skjemaet

#### Du som skal ha en person på besøk

Du må fylle ut dette skjemaet og sende det til den som skal besøke deg. Du kan sende det i posten eller som e-post. Skjemaet kan bare bli brukt til én reise.

#### Firma/organisasjon som skal ha en person på besøk

Firmaet/organisasjonen må fylle ut dette skjemaet og sende det til den som skal på besøk. Send skjemaet i posten eller som e-post. Skjemaet kan bare bli brukt til én reise.

#### Personen som skal besøke deg

Den som skal besøke deg, må ha med seg en kopi av dette skjemaet når han eller hun reiser inn i Schengenområdet. Skjemaet kan bare bli brukt til én reise.

### Who shall use this form?

#### You who are to have a person visiting you

You must fill in the form and send it to the person who is visiting you. You can send it by post or email. The form is only valid for one trip.

#### Company/organization having a person visiting

Fill in the form and send it to the person who is visiting. You can send it by post or email. The form is only valid for one trip.

#### The person who is visiting you

The person who is visiting you must bring a copy of this form when he or she is travelling into the Schengen area. The form is only valid for one trip.

## Privatperson som skal være sponsor

Du må fylle ut feltene og svare på det vi spør deg om.

## Person who will sponsor the visitor

You must fill in the form and answer our questions.

### Erklæring / declaration

Jeg forplikter meg til å dekke alle utgifter i forbindelse med besøket, inkludert hjemreisen.

I declare to cover all expenses connected to the visit, including the return trip.

Jeg forplikter meg til å la den som kommer på besøk, bo hos meg.

I declare to accommodate the visitor in my home.

**Fornavn / First name**

**Etternavn / Surname**

**Personnummer (11 siffer) / Norwegian national ID number**

**Adresse / Address**

**Postnummer / Post code**

**Poststed / Town**

**Telefonnummer / Phone number**

**E-postadresse / Email address**

## **Fylles ut av firmaet eller organisasjonen som skal være sponsor for besøket**

Du må fylle ut feltene og svare på det vi spør om.

## **To be completed by the company or the organization that is sponsoring the visit**

You must fill in the form and answer our questions.

### **Erklæring / declaration**

Vi forplikter oss til å dekke alle utgifter i forbindelse med besøket, inkludert hjemreisen.

We declare to cover all expenses in connection with the visit, including the return trip.

Vi forplikter oss til å dekke utgiftene i forbindelse med at den besøkende bor på følgende adresse:

We declare to cover all expenses associated with accommodating the visitor at the following address:

### **Adresse / address**

### **Postnummer / Post code**

### **Poststed / Town**

### **Navnet til firmaet /organisasjonen / Name of company/organization**

### **Organisasjonsnummer / The company's organization number**

### **Navn på kontaktperson / Name of the contact person**

### **Telefonnummer til kontaktperson / Telephone number of the contact person**

### **E-postadresse til kontaktperson / Email address of the contact person**

**Informasjon om personen som skal komme på besøk**

**Information about the person coming to visit**

**Fornavn / First name**

**Etternavn / Surname**

**Fødselsdato (dd.mm.åååå) / Date of birth (dd.mm.yyyy)**

**Fødested / Place of birth**

**Statsborgerskap / Citizenship**

**Adresse / Address**

**Dato for planlagt innreise**

**Date of intended entry**

**Dato for planlagt utreise**

**Date of intended departure**

**Formålet med besøket / The purpose of the visit**

**Adressen den besøkende skal bo på i Norge (hvis den ikke allerede er oppgitt)**

**The address the visitor will stay at in Norway (if not already mentioned)**

**Postnummer / Post code**

**Poststed / Town**

**Er du i slekt med den som kommer på besøk?**

**Are you related to the visitor?**

Nei/No

Ja, vi er i slekt på denne måten

Yes. This is how we are related

## **Erklæring og underskrift**

### **Acknowledgement and signature**

#### **Erklæring**

Jeg kjenner til og samtykker i det følgende: Innsamlingen av opplysninger i dette skjema er nødvendig for vurderingen av visumsøknaden til personen som jeg/firmaet/organisasjonen skal være sponsor for, og vurderingen av om innreisevilkårene for denne personen er oppfylt.

Opplysningene blir sendt til og lagret i Visa Information System (VIS) i fem år. I denne perioden er de tilgjengelige for utlendingsmyndighetene og andre forvaltningsorganer som foretar kontroll ved grensen til og innenfor Schengen-medlemstatenes territorium, for å verifisere at vilkårene for lovlig innreise til og opphold på medlemsstatenes territorium er oppfylt.

Ansvarlig myndighet for behandlingen av opplysningene er: Utlendingsdirektoratet, Postboks 2098 Vika, 0125 Oslo.

Jeg kjenner til at jeg har rett til å vite hvilke opplysninger som er registrert om meg i VIS og hvilket Schengenland som har registrert opplysningene. Jeg kjenner til at jeg kan be om å få rettet opplysninger om meg som ikke er korrekte og få slettet opplysninger om meg som har blitt lagret ulovlig. På forespørsel skal myndigheten som behandler visumsøknaden til personen som jeg/firmaet/organisasjonen skal være sponsor for, informere meg om hvordan jeg kan få innsyn i opplysningene som er registrert om meg, og få de rettet eller slettet.

Klager på behandlingen av personopplysninger sendes til Datatilsynet som er nasjonal tilsynsmyndighet. Datatilsynets kontaktadresse er Datatilsynet, Postboks 458 Sentrum, 0105 Oslo.

Jeg samtykker i at denne erklæringen til å være sponsor kan legges frem for andre forvaltningsorganer enn utlendingsmyndighetene, uten hinder av forvaltningslovens regler om taushetsplikt.

Jeg bekrefter at informasjonen jeg har gitt her er fullstendig og korrekt.

Jeg vet at jeg kan bli straffet dersom jeg gir falsk forklaring. (se utlendingsloven § 108 første ledd bokstav c og straffeloven § 166).

#### **Acknowledgement**

I am aware of and consent to the following: the collection of the data required by this form of sponsorship, are mandatory for the examination of the visa application/entry conditions for the sponsored person. Such data 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 Member States for the purpose of verifying

whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled.

The authority of the Member State responsible for processing the data is: The Norwegian Directorate of Immigration, P.O. Box 2098 Vika, N-0125 Oslo, Norway.

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 the 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 the visa application of the sponsored person 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 (Norwegian Data Protection Authority, P.O. Box 458 Sentrum, N-0105 Oslo, Norway) will hear claims concerning the protection of personal data.

I agree that this declaration of sponsorship can be presented to public administrative agencies other than the immigration authorities, without the hinderance of the Public Administration Act's rules on the duty of confidentiality

I confirm that the information I have given here is complete and correct.

I am familiar with the criminal liability that is associated with giving a false explanation, see the Immigration Act section 108 first paragraph letter c and the Penal Code section 166.

**Navnet på personen jeg/vi sponser**

**The name of the person I/we sponsor**

**Underskrift / Signature**

Sted / Place

Dato / Date

Underskriften til sponsoren / kontaktpersonen. Skriv for hånd.  
Signature of the sponsor/contact person. Write by hand.

Stempelet til firmaet/organisasjonen  
Stamp/seal of the company/organization

**Specimen of Poland's form of providing proof of sponsorship  
and/or private accommodation**

The national form for proof of sponsorship and/or private accommodation.

**REPUBLIKA POLSKA** **RZECZPOSPOLITA POLSKA** **REPUBLIQUE DE POLOGNE**  
**ZAPROSZENIE** **INVITATION / INVITATIO**

Zapraszający / I, the undersigned, / Je soussigné(e)  
Data (miejsc) i adres (miejsc) / Date (and place) of birth (place) / A  
Obywatelstwo / Nationality / Nationalité  
Rodzaj, seria i numer dokumentu tożsamości / ABON / Identity / Address / REGON / PESEL / Identity / ABON  
Adres zamieszkania / Address / Residential / Corporate address / Address / ZIP  
Zawód / Profession / Profession  
Zaprasza na okres od / invite for the period of time from / Av / from / la période de / do / to / via  
Data i miejsce urodzenia / Date and place of birth (place) / B  
Obywatelstwo / Nationality / Nationalité  
Seria i numer dokumentu tożsamości / Series and number of a civil document / Kind of number of document to which  
Adres zamieszkania / Address / Address  
Stopień pokrewieństwa z zapraszanym / Family relationship to applicant / Lien de parenté avec le demandeur

Nazwa organu klucy dokonał wpisu do ewidencji zaproszeń / Name of authority which made the entry in the register of invitations / Le nom de l'autorité qui a fait l'inscription  
Data i numer wpisu do Ewidencji zaproszeń / Registration date and number / La date et le numéro d'enregistrement

oraz / accompanied by / accompagné(e) de  
małżonka: żona / spouse / son conjoint  
Data i miejsce urodzenia / Date of birth (place) / Né(e) le / Mère / Sexe / Sexe  
dzieci / children / ses enfants  
Data i miejsce urodzenia / Date of birth (place) / Né(e) le / Mère / Sexe / Sexe

Zobowiązuję się do pokrycia kosztów związanych z pobytem i wyjazdem zapraszanego cudzoziemca, w tym kosztów ewentualnego leczenia oraz kosztów wydalenia z terytorium Rzeczypospolitej Polskiej.  
I agree to cover the living cost and the departure cost of the invited foreigner, including the cost of medical treatment as well the cost of deportation from Republic of Poland.  
Je m'engage à prendre en charge les frais de séjour et de départ de l'étranger invité, y compris les frais de soins médicaux et de déportation de la République de Pologne.

Podpis zapraszającego  
Signature of the person inviting foreigner  
Signature de la personne qui donne l'invitation

PWPWSA 2002

Specimen of Portugal's form providing proof of sponsorship and/or private accommodation

S.



R.

## TERMO DE RESPONSABILIDADE TERM OF RESPONSABILITY

- Alojamento / Accomodation / Logement**
- Encargos de subsistência / Bearing of costs / Frais de séjour**

*De acordo com o Artigo 14º (4) do Código de Vistos, tendo como objetivo o convite de um nacional de país terceiro que necessita de visto para transpor as fronteiras Schengen / In accordance with Article 14(4) of the Visa Code for the purpose of inviting a third-country national subject to visa obligation / Conformément aux dispositions de l'article 14 (4) du Code Visa, en ce qui concerne l'invitation d'un ressortissant de pays tiers qui a besoin d'un visa pour traverser la frontière Schengen*

**Processo/ Application/ Demande Nº ..... Data/ Date/ Date .....**

### ***Identificação do responsável / Personal data of the undersigned / Identification de la personne responsable***

<b>1. Apelido/Surname/Nom</b>	
<b>2. Nome(s) Próprio(s)/Given Name/Prénom</b>	
<b>3. Nacionalidade/Nationality/Nationalité</b>	<b>4. Local de nascimento/Place of birth/Lieu de naissance</b>
<b>5. Data de nascimento/Date of birth/Date de naissance</b>	<b>6. Sexo/Sex /Sexe</b>
<b>7. Nº de identificação/Identity Card/Carte d'identité nº</b>	<b>8. Passaporte nº/Passport No/Passeport nº</b>
<b>Data e local de emissão/Date and place of issue/Date et lieu d'émission</b>	<b>Data e local de emissão/ Date and Place of issue/ date et lieu d'émission</b>
<b>9. Profissão/Occupation/Profession</b>	
<b>10. Residência permanente/Permanent address/Résidence permanente</b>	
<b>10.1 - Rua/Street/Rue.....</b> <b>10.2 - Nº/No/Nº .....</b> <b>10.3 – Andar/Floor/Étage .....</b> <b>10.4 – Localidade/City/Localité .....</b> <b>10.5 – Código Postal /Postal Code/Code postal .....</b> <b>10.6 - Telefone/Telephone/ Téléphone .....</b>	

**Declaro estar em condições de garantir o alojamento/I declare being able to assume the accommodation/Je déclare pouvoir assurer l'hébergement**

**De/From/De** ...../...../..... **Até/Until/Jusqu'a** ...../...../.....  
Dia/Day/Jour Mês/ Month/Mois Ano/Year/année Dia/Day/Jour Mês/ Month/Mois Ano/Year/Année

- Na minha residência acima/At my above address/Dans ma résidence ci-dessus**  
 **Na morada indicada abaixo/At the following address/À l'adresse ci-dessous:**

<b>11. Endereço do alojamento/Address for the accommodation/Adresse de l'hébergement</b> <b>11.1 - Rua/Street/Rue.....</b> <b>11.2 - N°/No/N° ..... 11.3 – Andar/Floor/Étage .....</b> <b>11.4 – Localidade /City/Localité.....</b> <b>11.5 – Código postal /Postal code/Code postal.....</b> <b>11.6 - Telefone/Telephone/ Téléphone .....</b>
--

***Identificação do convidado / Personal data of the invitee/ Identification de la personne invitée***

<b>12. Apelido/Surname/Nom</b>	
<b>13. Nome(s) Próprio(s)/Given Name/Prénom</b>	
<b>14. Nacionalidade/Nationality/ Nationalité</b>	<b>15. Local de nascimento/Place of birth/Lieu de naissance</b>
<b>16. Data de nascimento/Date of birth/Date de naissance</b>	<b>17. Sexo/Sex/Sexe</b>
<b>18. Eventuais laços familiares com o responsável*/Possible family ties with the undersigned**/Eventuels liens familiaux avec la personne responsable***</b>	

- Declaro que assumo apenas o alojamento e os custos de repatriamento/I declare I will only assume the accommodation and repatriation costs/Je déclare que je soutiens simplement l'hébergement et les frais de rapatriement**
- Declaro que assumo também todos os outros encargos inerentes à estadia/I declare I will bear all living costs inherent to the stay/Je déclare que je soutiens aussi tous les autres frais compris dans le séjour**

\* Campo de preenchimento facultativo / \*\* Optional field / \*\*\* Champ de remplissage facultative

*Declaro ter conhecimento e autorizo o seguinte: Os dados que constam do presente formulário serão tratados pela Direção Geral dos Assuntos Consulares e Comunidades Portuguesas (DGACCP) para gestão dos pedidos de visto; estes dados podem ser acedidos pela AIMA – Agência para a Integração Migrações e Asilo nos termos da lei; os dados que constam do presente formulário serão inseridos e armazenados pelos serviços que os recebem no Sistema de Informação sobre Vistos (VIS) por um período máximo de 5 anos durante o qual estarão acessíveis às autoridades dos outros Estados Membros; tenho o direito de acesso e retificação aos dados que me dizem respeito registados no VIS, devendo dirigir o meu pedido por escrito à DGACCP; tenho o direito de solicitar a alteração ou anulação dos dados, em particular se forem incorretos.*

*Esta declaração, devidamente reconhecida pela autoridade competentes, deve ser apresentada sob a forma de original às autoridades consulares competentes para examinar o pedido de visto da pessoa convidada.*

*I am aware of and consent to the following: The personal data contained in this form will be handled by the Directorate General for Consular Affairs and Portuguese Communities (DGACCP) for the management of visa applications; those data can be made accessible to the AIMA – Agência para a Integração Migrações e Asilo, as provided by law; the personal data contained in this form is collected and handled by the services receiving the form, and stored in the Visa Information System (VIS) for a period of five years and made accessible to the authorities of the other Member States; I have the right to have it altered or deleted, in particular should it be inaccurate.*

*The present Declaration, duly stamped by the competent authority, must be presented (original) to the consular authorities competent for examining the visa application of the person invited.*

*En connaissance de cause, j'accepte ce qui suit: Les données contenues dans ce formulaire seront traitées par la Direction Générale des Affaires Consulaires et des Communautés Portugaises (DGACCP), en vue de la gestion des demandes de visa; Ces données peuvent être consultées par AIMA – Agência para a Integração Migrações e Asilo, conformément à la Loi; ces données seront saisies et conservées dans le système d'information sur les visas (VIS) pendant une période maximale de cinq ans, durant laquelle elles seront accessibles aux autorités des autres Etats membres; J'ai un droit d'accès et de rectification des données me concernant et conservées dans le VIS, autant que je présente une demande par écrit à la DGACCP; j'ai le droit de demander la modification ou l'annulation des données en particulier si elles sont incorrectes. Cette déclaration, dûment reconnue par l'autorité compétente, doit être présentée dans la forme d'original aux autorités compétentes pour examiner la demande de visa de la personne invitée.*

*Declaro solenemente que a informação contida nesta declaração é autêntica/ I solemnly declare that the information provided in this Declaration of Proof is true/ Je déclare solennellement que l'information contenue dans la présente déclaration est authentique.*

*Lido e aprovado  
Read and approved  
Lu et approuvé*

*Autentificação da assinatura de  
Witnessed for certification of the signature by  
Authentification de signature par*

-----/-----/-----

**Data/Date/Date**

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Specimen of Slovakia's form of providing proof of sponsorship  
and/or private accommodation.

**POTVRDENIE O OVERENÍ POZVANIA \* AA \* 011189**  
**CONFIRMATION OF VERIFIED INVITATION**  
**BESTÄTIGUNG ÜBER DIE BEGLAUBIGUNG DER EINLADUNG**

**POZYVANÁ OSOBA/ INVITED PERSON/ EINGELADENE PERSON:**

Priezvisko/ Surname / Familienname							
Rodné priezvisko/ Maiden name/ Geburtsname							
Meno/ Name/ Name							
Datum nar./ Date of birth/ Geburtsdatum	Miesto narodenia/ Place of birth/ Geburtsort	Stupeň vzdelania/ Level of education/ Schulbildung	Partňa/ Spoločník/ Partner/ Spouse	Typ pozvania/ Type of an invitation/ Art der Einladung	Dobrovoľný člen/ Voluntary member/ Freiwillige(r)	Datum nar./ Date of birth	Číslo narodenia/ National ID number/ Geburtsnummer
Miesto byvania/ Permanent residence/ Anschrift in							
Miesto byvania podľa SR/ Place of residence after arrival to Slovak republic/ Wohnort nach der Ankunft in die Slowakische Republik							
Politický zväzok/ funkcia v ňom/ (Member of political party) in a company/ Vereinstreue/ Mitgliedschaft/ Funktion in der Partei							
Účtovná jednotka, sídlo a iné údaje spoločnosti/ Hlavné sídlo, rezidenčné, subjekt of enterprise/ Firm name, Firm name, Gegenstand der Firmeneintragung							
Deti do 13 rokov/ Children up to 13 years/ Kinder bis 13 Jahre							
Meno/ Name/ Name		Priezvisko/ Surname/ Familienname			Datum nar./ Date of birth/ Geburtsdatum		

**POZYVAJÚCA OSOBA/ INVITING PERSON/ EINLADENDE PERSON:**

Priezvisko/ Surname/ Familienname							
Rodné priezvisko/ Maiden name/ Geburtsname							
Meno/ Name/ Name							
Datum nar./ Date of birth/ Geburtsdatum	Miesto narodenia/ Place of birth/ Geburtsort	Stupeň vzdelania/ Level of education/ Schulbildung	Partňa/ Spoločník/ Partner/ Spouse	Charakteristika/ Purpose of invitation/ Zweck der Einladung	Dobrovoľný člen/ Voluntary member/ Freiwillige(r)	Datum nar./ Date of birth	Číslo narodenia/ National ID number/ Geburtsnummer
Adresa/ SA/ Address in Slovak Republic/ Adresse in der Slowakischen Republik							
Název organizácie/ Firm/ a podnik/ podnik/ účel/ Name of the organization/ company and subject of activities/ Zweck der Einladung/ Zweck der Einladung						Miesto byvania/ Place of residence/ Wohnort	

**ÚRADNÉ ZÁZNAMY/ OFFICIAL STATEMENTS/ AMTSVERMERKE:**

<p>Overené nar./ Verified as/ Beglaubigt in</p> <p style="text-align: right;">dňa/ day/ am</p>
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**POTVRDENIE O OVERENÍ POZVANIA \* AC \*011189**  
**CONFIRMATION OF VERIFIED INVITATION**  
**BESTÄTIGUNG ÜBER DIE BEGLAUBIGUNG DER EINLADUNG**

**POZÝVANÁ OSOBA/ INVITED PERSON/ EINGELADENE PERSON:**

Priezvisko/ Surname/ Familienname:							
Rodné priezvisko/ Maiden name/ Geburtsname:							
Meno/ Name/ Name:							
Dátum nar./ Date of birth/ Geburtsdatum	Miesto narodenia/ Place of birth/ Geburtsort	Podľa ktorého štátu/ According to which country/ Staatsangehörigkeit	Podľa ktorého štátu/ According to which country/ Staatsangehörigkeit	Typ pozvania/ Type of an invitation/ Art der Einladung	Číslo od/ Valid from/ Gültig ab	Dátum do/ Date to/ Gültig bis	Príloha/ Attachment/ Beilage
Príloha/ Attachment/ Beilage							
Miesto bytia/ Place of residence/ Wohnort							
Miesto bytia/ Place of residence after arrival in Slovak Republic/ Wohnort (nach der Ankunft in der Slowakischen Republik)							
Príslušnosť/ Citizenship/ Staatsangehörigkeit							
Odkiaľ/ From/ Von							
Meno/ Name/ Name							
Priezvisko/ Surname/ Familienname							
Dátum nar./ Date of birth/ Geburtsdatum							

**POZÝVAJÚCA OSOBA/ INVITING PERSON/EINLADENDE PERSON:**

Priezvisko/ Surname/ Familienname:							
Rodné priezvisko/ Maiden name/ Geburtsname:							
Meno/ Name/ Name:							
Dátum nar./ Date of birth/ Geburtsdatum	Miesto narodenia/ Place of birth/ Geburtsort	Podľa ktorého štátu/ According to which country/ Staatsangehörigkeit	Podľa ktorého štátu/ According to which country/ Staatsangehörigkeit	Podľa ktorého štátu/ According to which country/ Staatsangehörigkeit	Podľa ktorého štátu/ According to which country/ Staatsangehörigkeit	Číslo od/ Valid from/ Gültig ab	Číslo do/ Valid to/ Gültig bis
Miesto bytia/ Place of residence/ Wohnort							
Miesto bytia/ Place of residence after arrival in Slovak Republic/ Wohnort in der Slowakischen Republik							
Miesto bytia/ Place of residence after arrival in Slovak Republic/ Wohnort in der Slowakischen Republik						Miesto bytia/ Place of residence after arrival in Slovak Republic/ Wohnort in der Slowakischen Republik	

**ÚRADNÉ ZÁZNAMY/ OFFICIAL STATEMENTS/ AMTSVERMERKE:**

Otvorené nar./ Verified at/ Beglaubigt in	dn / day/ am

Specimen of Republic of Slovenia's form of providing proof of sponsorship and/or private accommodation



# GARANTNO PISMO LETTER OF GUARANTEE

## I. Podatki o garantu

Information on the guarantor

### Izpolniti za zasebni obisk

For private visit

Ime in priimek: \_\_\_\_\_

Name and surname

Datum rojstva: \_\_\_\_\_

Date of birth

EMŠO: \_\_\_\_\_

National identity number

Državljanstvo: \_\_\_\_\_

Nationality

Razmerje do tujca: \_\_\_\_\_

Relation to foreigner

### Izpolniti za poslovni obisk

For business visit

Pravna oseba/samostojni podjetnik

Legal Entity/Company

Matična številka: \_\_\_\_\_

Business registration number

Ime in priimek zakonitega zastopnika:

Name and surname of legal representative

Ime in priimek pooblaščenca zakonitega  
zastopnika (predložiti ustrezno pooblastilo):

Name and surname of proxy of the legal representative (present  
authorization)

Naslov: \_\_\_\_\_

Address

Ulica in hišna številka / Street and house Nr.

Poštna št. / Post code

Kraj / City

Telefonska številka: \_\_\_\_\_

Telephone no.

## II.

## Podatki o tujcu

Information on the foreigner

Ime: \_\_\_\_\_

Name

Priimek: \_\_\_\_\_

Surname

Datum rojstva: \_\_\_\_\_

Date of birth

Državljanstvo: \_\_\_\_\_

Nationality

Firma oz. ime in sedež pravne osebe, kjer je tujec zaposlen oziroma se izobražuje:

Name and address of the legal entity/company where the foreigner is employed or enrolled

\_\_\_\_\_

### III. Podatki o obisku

Information on the visit

Razlog obiska:  
Reason for visit: \_\_\_\_\_

Trajanje obiska:  
Duration of stay

Od: \_\_\_\_\_  
From

do: \_\_\_\_\_  
To

#### S tujcem je bil stik vzpostavljen:

The contact was established

- Na čigavo pobudo (ustrezno obkroži):  
On the initiative of (mark as appropriate)

Garanta   
Guarantor

Prosilca   
Applicant

- Na kakšen način: \_\_\_\_\_  
Manner of establishing contact

#### IV.

#### Jamstva

Guarantees

#### Z garantnim pismom jamčim, da sem sposoben/a (garant ustrezno obkroži in dopolni ter v primeru prevzemanja jamstva predloži ustrezna dokazila o finančnih sredstvih garanta in/ali lastništvu ali najemu nepremičnine):

With this Letter of Guarantee hereby I declare that I am willing to (guarantor indicates accordingly and provides proof of financial means or ownership or rental of real estate)

- kriti stroške bivanja   
Cover the subsistence costs

- zagotoviti nastanitev (garant navede naslov bivanja): \_\_\_\_\_  
Provide accommodation (state the address)

Izjavljam, da so podatki, ki so navedeni v tem garantnem pismu, resnični. Seznanjen sem, da se podatki iz tega garantnega pisma zbirajo in obdelujejo skladno z določbami Zakona o tujcih (Uradni list RS, št. 1/18 – uradno prečiščeno besedilo, 9/18 – popr., 62/19 – odl. US in 57/21) in Zakona o varstvu osebnih podatkov (Uradni list RS, št. 86/2004 - uradno prečiščeno besedilo). Soglašam, da se podatke, zapisane v garantnem pismu, elektronsko obdela in posreduje organu, ki vodi vizumski postopek. Garantnemu pismu skladno s četrtem odstavkom 24. člena Zakona o tujcih prilagam dokazila o zadostnih finančnih sredstvih garanta, lastništvu ali najemu nepremičnine garanta. Garantno pismo bom skupaj s pripadajočimi prilagami posredoval tujcu, ki jih priloži preostali dokumentaciji, predloženi organu, ki vodi vizumski postopek.

Na podlagi drugega odstavka 24. člena Zakona o tujcih s podpisom garantnega pisma jamčim, da bom tujcu zagotovil nastanitev oziroma kril stroške bivanja v Republiki Sloveniji, če jih sam ne bo hotel ali zmoget plačati. S podpisom garantnega pisma jamčim, da bom kril tudi morebitne stroške nastanitve tujca v centru za tujce ali v azilnem domu ter stroške morebitne odstranitve tujca iz države. Zavedam se, da je izdaja garantnega pisma z namenom pridobitve vizuma z drugačnim namenom, kot je v njem navedena, kazniva.

Seznanjen sem z dejstvom, da se primeru zavrnitve izdaje vizuma osebi, za katero je bilo napisano garantno pismo, informacije glede zavrnitve posredujejo izključno prosilcu za vizum.

I hereby declare that the information given in the Letter of Guarantee is correct and true. I am aware that the data included in the Letter of Guarantee is collected and processed in compliance with the provisions of the Foreigners Act (Official Gazette of the Republic of Slovenia Nos. 1/18 – official consolidated text, 9/18 – corr., 62/19 – Constitutional Court decision – and 57/21) and the Personal Data Protection Act (Official Gazette of the Republic of Slovenia No. 86/2004 – official consolidated text). I agree that the information set out in the Letter of Guarantee can be electronically processed and forwarded to the authority conducting the visa procedure. In compliance with Article 24, paragraph 4, of the Foreigners Act, the documents indicating the guarantor's financial status, ownership or rental of real estate are enclosed to the Letter of Guarantee, which will be forwarded to the foreigner together with relevant enclosures. The foreigner will submit it to the authority conducting the visa procedure together with the remaining documents.

Pursuant to Article 24, paragraph 2, of the Foreigners Act I hereby guarantee, by signing the Letter of Guarantee, to provide accommodation for the foreigner or cover his/her subsistence costs in the Republic of Slovenia if he/she is unwilling or unable to cover them. With my signature on the Letter of Guarantee I guarantee that I will also cover the potential accommodation costs for the foreigner in a centre for foreigners or an asylum centre as well as the costs of potential deportation of the foreigner. I am aware that issuing a Letter of Guarantee for obtaining a visa for any other purpose than that stated in the Letter is punishable by law.

I am aware that in case of refusal to issue a visa to the person for which the Letter of Guarantee has been drawn up, reasons for the refusal will be communicated only to the visa applicant.

#### Datum in podpis:

Date and signature: \_\_\_\_\_



Specimen of Sweden's form of providing proof of sponsorship and/or private accommodation

## Invitation

### Before application for Schengen visa

To be filled in by persons in Sweden who wish to invite relatives or friends from abroad

Fylls i av Migrationsverket eller utlandsmyndigheten	
Dossiernummer	Signatur

Fill in this form if you wish to invite a relative or friend to visit you for maximum 90 days in a period of 180 days. Then send it complete with attachments (see below) by mail or scan them and send them via email **to your relative or friend** abroad. He or she must then submit your form with its attachments together with his or her application documents to a Swedish mission abroad (embassy or equivalent).

Note that some foreign authorities might have special regulations. Check this with the embassy.

Remember that you who invite must sign with your signature before sending it to your relative or friend. You will also find this form and more information on [www.migrationsverket.se](http://www.migrationsverket.se) or [www.swedenabroad.se](http://www.swedenabroad.se).

#### 1. Personal details (the person who lives in Sweden)

Surname (Family name)		Given name(s) (in full)	
Personal identity number	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Citizenship	
Address			
Daytime telephone number		Email address	

#### 2. Details regarding your employment (only applies if you are guarantor for the invited person's travel or upkeep)

Your profession or occupation		Your employer	
Employed since	Annual income	Other income (e.g. pension, maintenance, etc.)	

#### 3. The applicant (the person whom you are inviting)

Family name		Given name(s) (in full)		Dossier no., if any
Previous family name	Date of birth (year, month, day)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		
Citizenship	Present place of residence and country			
Daytime telephone number	Email address			



## 8. Other information

### Documents that you must enclose

- Copy of your ID-card, passport or equivalent, which proves your identity.
- Certificate of civic registration marked 'Inbjudan' (invitation) obtainable from the Swedish Tax Office and not older than 3 months.
- Documents which show details of income and assets for you or the person who pays for the applicant's upkeep during the visit in Sweden (for example pay slips or bank statements for the past three months, pension statement or equivalent).

### Assurance

I am aware of and consent to the following: the collection of the data required by this invitation form and any personal data concerning me which appear on the invitation form will be supplied to the relevant authorities of the Member States and processed by those authorities for the purposes of a decision on the visa application.

Such data 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. 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.

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 the 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 requesting this invitation 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 national law of the State concerned. The authority of the Member State responsible for processing the data is: The Swedish Migration Agency, 601 70 Norrköping, Sweden, [www.migrationsverket.se](http://www.migrationsverket.se).

The Swedish Authority for Privacy Protection is the national supervisory authority ([www.imy.se](http://www.imy.se)) and they 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 may render me liable to prosecution under the law of the Member State which deals with the application.

Place and date

Signature

*A person who provides incorrect information in the application, or knowingly omits information that is of importance, can be fined or sentenced to imprisonment. See Chapter 20, section 6, paragraph 2 of the Aliens Act (2005:716).*

### Proceed as follows

Fill in the form and send it with its attached documents to the applicant.

## Inbjudan

### Inför ansökan om Schengenvisering

Fylls i av personer i Sverige som vill bjuda in släktingar eller vänner från utlandet

Fylls i av Migrationsverket eller Utlandsmyndigheten	
Dossiernummer	Signatur

Fyll i den här blanketten om du vill bjuda in en släkting eller vän att besöka dig i Sverige upp till 90 dagar under en period av 180 dagar. Du ska skicka blanketten tillsammans med bilagorna per post eller skanna in dem och skicka dem via e-post till **din släkting eller vän i utlandet**. Han eller hon ska därefter lämna in dokumenten tillsammans med sin ansökan om Schengenvisering till en svensk myndighet i utlandet (ambassad, konsulat eller motsvarande).

Observera att vissa utlandsmyndigheter kan ha särskilda regler. Kontrollera detta via ambassaden.

Kom ihåg att du som bjuder in måste skriva under med din signatur innan du skickar den till din släkting eller vän. Du kan även hitta den här blanketten och mer information på [www.migrationsverket.se](http://www.migrationsverket.se) eller på [www.swedenabroad.se](http://www.swedenabroad.se).

#### 1. Personuppgifter (personen som bor i Sverige)

Efternamn		Förnamn (samtliga)	
Personnummer	Kön <input type="checkbox"/> Man <input type="checkbox"/> Kvinna	Medborgarskap	
Adress			
Telefonnummer där du nås under dagtid		E-postadress	

#### 2. Uppgifter om din anställning (besvaras endast om du garanterar resa eller uppehålle för den inbjudna personen)

Ditt yrke/sysselsättning		Din arbetsgivare	
Anställd sedan	Årsinkomst	Annan försörjning (t.ex. pension, underhåll etc.)	

#### 3. Den sökande (den person som du bjuder in)

Efternamn		Förnamn (samtliga)		Ev. dossiernummer
Tidigare efternamn	Födelsedatum (ÅÅÅÅ-MM-DD)	Kön <input type="checkbox"/> Man <input type="checkbox"/> Kvinna		
Medborgarskap	Nuvarande bostadsort och land			
Telefonnummer dagtid	E-postadress			



## 8. Övriga upplysningar

### Dokument som du ska bifoga

- Kopia av id-kort, passhandling eller motsvarande som visar din identitet.
- Personbevis "Inbjudan" som du beställer från Skatteverket och som inte är äldre än tre månader.
- Handlingar som visar uppgifter om inkomster och tillgångar för dig eller den som betalar för den sökandes försörjning under besöket i Sverige (till exempel lönebesked eller kontoutdrag från banken för de senaste tre månaderna, pensionsbesked eller motsvarande).

### Försäkran

Jag är införstådd med och samtycker till följande: Insamling av de uppgifter som krävs enligt detta inbjudningsformulär, och alla personliga uppgifter om mig som anges på inbjudningsformuläret kommer att översändas till behöriga myndigheter i medlemsstaterna och behandlas av dess myndigheter i prövningen av viseringsansökan.

Dessa uppgifter kommer att registreras i Informationssystemet för viseringar (VIS) (1) och lagras där under en period av högst fem år; under den perioden kommer uppgifterna att vara tillgängliga för viseringsmyndigheterna och de myndigheter som är behöriga att kontrollera viseringar vid de yttre gränserna och i medlemsstaterna. Under vissa förhållanden kommer uppgifterna även vara tillgängliga för utsedda myndigheter i medlemsstaterna och för Europol för att förhindra, upptäcka och utreda terroristbrott och andra allvarliga brott.

Jag är införstådd med att jag har rätt att i vilken medlemsstat som helst underrättas om de uppgifter rörande mig som finns registrerade i VIS och om vilken medlemsstat som har registrerat uppgifterna samt begära att uppgifter rörande mig som är oriktiga korrigeras och de som olagligen behandlats stryks. På min uttryckliga begäran kommer den myndighet som begärt in denna inbjudan att informera mig om hur jag kan gå tillväga för att utöva min rätt att kontrollera mina personuppgifter och få dem korrigerade eller strukna, inklusive vilka rättsmedel som står tillbuds enligt den berörda statens nationella lagstiftning. Följande myndighet i medlemsstaten ansvarar för att behandla uppgifterna: Förvaltningsenheten, Migrationsverket, 601 70 Norrköping, [www.migrationsverket.se](http://www.migrationsverket.se).

Nationell tillsynsmyndighet är Integritetsskyddsmyndigheten ([www.imy.se](http://www.imy.se)) och de tar emot klagomål som rör skyddet av personuppgifter.

Jag förklarar att alla de upplysningar jag lämnat såvitt jag vet är korrekta och fullständiga. Jag är medveten om att jag kan underkastas lagföring enligt lagstiftningen i den Schengenstat som handlägger min ansökan om jag lämnat oriktiga uppgifter.

Ort och datum

Namnunderskrift

*Den som i sin ansökan lämnar oriktiga uppgifter eller medvetet låter bli att tala om uppgifter av betydelse kan dömas till böter eller fängelse. Se 20 kap.6 § 2 utlänningslagen (2005:716).*

**OBS!** Fyll i den här blanketten och skicka den med bilagorna till din släkting eller vän i utlandet.

**Specimen of Switzerland's form of providing proof of sponsorship  
and/or private accommodation**



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Schweizerische Verordnung / Migrationbehörde / Grenzposten

N° ORDIS 1  
N° ORDIS 2  
N° ORDIS 3

Ein durch den Garant(en) im Namen des  
Besuchers abgeschlossene  
Reisekrankenversicherung wird verlangt  
 Ja  Nein



### Verpflichtungserklärung (Artikel 7, 8 und 9 der Verordnung über die Einreise und die Visumerteilung, VEV.RS 142.204)

Bitte Hinweise auf der folgenden Seite lesen. Bitte blauen oder schwarzen Kugelschreiber verwenden und in Blockschrift ausfüllen.

1. Besucherin* (Garantnehmer/in) Durch die eingeladene(n) Person(en) auszufüllen			
Name :	1	2	3
Vorname(n) :	1	2	3
Geburtsdatum (Tag/Monat/Jahr) :	1	2	3
Nationalität(en) :	1	2	3
Pass-Nr. :	1	2	3
Strasse, Nr. :	1	2	3
Wohnort / Land :	1	2	3

Aufenthalt geplant von ..... bis ..... entspricht ..... Tagen.

\*Für Familien oder Gruppen mit mehr als drei Personen, aber maximal zehn Personen, werden die Daten der anderen Besucher/innen auf dem für diesen Fall vorgesehenen Zusatzblatt eingetragen.

2. Garant/in Durch die eingeladene(n) Person(en) auszufüllen und durch den/die Garant/in zu ergänzen			
Name :	Vorname :	Geburtsdatum :	
Nationalität(en) :	Aufenthaltskategorie :	<input type="checkbox"/> B <input type="checkbox"/> C	ZEMIS-Nr. :
Strasse, Nr. :	PLZ, Ort :		

**Erklärung des/der Garant/en:** Ich verpflichte mich / Wir verpflichten uns unwiderruflich, bis zu einem Betrag von 30'000 Schweizer Franken sämtliche ungedeckten Kosten für den Lebensunterhalt (einschliesslich Unfall, Krankheit und Rückreise) zu übernehmen, die den zuständigen Behörden des Bundes, der Kantone oder der Gemeinden sowie privaten Erbringern von medizinischen Dienstleistungen durch den Aufenthalt der oben unter Ziffer 1 aufgeführten Person(en) entstehen. Ich bin / Wir sind mit den auf der folgenden Seite dieses Formulars aufgeführten weiteren Bedingungen einverstanden.

Der Garant / Die Garantin :	Ort :	Datum :	Unterschrift :
<input type="checkbox"/> Der Ehegatte / Die Ehegattin :			
<input type="checkbox"/> Der/Die eingetragene Partner/in :	Ort :	Datum :	Unterschrift :

3. Stellungnahme der zuständigen kantonalen oder kommunalen Amtsstelle	
Die zuständige Amtsstelle erklärt, dass nach ihrer Einschätzung der/die Garant/in in der Lage ist, den eingegangenen finanziellen Verpflichtungen nachzukommen.	
<input type="checkbox"/> Ja	<input type="checkbox"/> Nein
Für den Fall, dass der Abschluss einer Reisekrankenversicherung, unterzeichnet durch den Garant(en), lautend auf den Namen der gesuchstellenden Person, vorliegt (s. Rubrik oben rechts), erklärt die zuständige Behörde, dass die Reisekrankenversicherung i. S. v. Art. 10 Abs. 1 VEV zweckmässig ist.	
<input type="checkbox"/> Ja	<input type="checkbox"/> Nein

Bemerkungen:

Unterschrift und Stempel:

Die Verpflichtungserklärung ist nur gültig mit Amtsstempel und Unterschrift der zuständigen kantonalen oder kommunalen Amtsstelle oder eines Grenzpostens.

#### 4. Umfang der Verpflichtung und wichtige Hinweise

- Die für die Visumerteilung zuständige Behörde kann zur Kontrolle der Einreisevoraussetzungen und der Aufenthaltsumstände einer Ausländerin oder eines Ausländers die unterzeichnete Verpflichtungserklärung einer solventen natürlichen oder im Handelsregister eingetragenen juristischen Person (Garantin) in der Schweiz verlangen. Diese Verpflichtung kann nur von Bürgerinnen und Bürgern der Schweiz oder des Fürstentums Liechtenstein, welche in einem der beiden Staaten wohnen oder Ausländerinnen und Ausländern mit einer gültigen Aufenthalts- oder Niederlassungsbewilligung abgegeben werden (Art. 33 und 34 des Bundesgesetz über die Ausländerinnen und Ausländer, AuG, SR 142.20).
- Der Garant bzw. die Garantin kann sich pro Verpflichtungserklärung für höchstens zehn gemeinsam ein- und ausreisende Personen verpflichten (Art. 8 Abs. 5 VEV).
- Mit Unterzeichnung dieser Erklärung verpflichtet sich der Garant oder die Garantin, im Sinn einer unwiderruflichen Schuldanererkennung bis zu einem Betrag von 30'000 Schweizer Franken sämtliche ungedeckten Kosten für den Lebensunterhalt, einschliesslich Unfall und Krankheit sowie die Rückreise zu übernehmen, die dem Gemeinwesen oder privaten Erbringern von medizinischen Dienstleistungen durch den Aufenthalt der Ausländerin oder des Ausländers entstehen (Art. 8 Abs. 1 VEV).
- Die Verpflichtung wird mit dem Datum der Visumausstellung oder der Einreise (Verpflichtungserklärung an der Grenze) wirksam und endet mit der Ausreise der Ausländerin oder des Ausländers aus der Schweiz, jedoch spätestens zwölf Monate nach der Einreise. Die in diesem Zeitraum entstandenen ungedeckten Kosten können während fünf Jahren nach ihrer Entstehung geltend gemacht werden (Art. 8 Abs. 3, 3bis und 4 VEV).
- Die zuständigen Behörden können zur Identitätsprüfung und zur Überprüfung der Angaben insbesondere die folgenden Unterlagen verlangen:
  - Identitäts- und Ausländerausweise;
  - Auszüge aus dem Betreibungs- und Konkursregister;
  - Lohnabrechnungen;
  - Bankkontoauszüge;
  - Steuereinschätzung.
- Der Garant bzw. die Garantin ermächtigt die zuständigen Behörden, bei den Betreibungs- und Steuerregistern sowie bei Polizeibehörden sachdienliche Auskünfte einzuholen (Art. 9 VEV).
- Eine positive Stellungnahme der kantonalen Behörden zur Verpflichtungserklärung verleiht keinen Anspruch auf die Visumerteilung.
- Gegen eine negative Stellungnahme der zuständigen kantonalen Behörden zu dieser Verpflichtungserklärung kann keine Beschwerde erhoben werden. Nur gegen die Visumverweigerung der Auslandsvertretung kann innerhalb von 30 Tagen beim Staatssekretariat für Migration, Quellenweg 6, CH-3003 Bern-Wabern schriftlich Einsprache erhoben werden (Art. 6 Abs. 2bis AuG). Bei nicht visumpflichtigen Ausländerinnen und Ausländern, die nicht Angehörige eines EFTA- oder EU-Staates sind, können die Grenzbehörden eine Verpflichtungserklärung verlangen (Art. 7 Abs. 2 VEV). Die Verpflichtung gilt dann für zwölf Monate (in Analogie zu Art. 8 Abs. 3bis VEV).

#### 5. Hinweise zur Reisekrankenversicherung

- Unabhängig vom Verfahren der Verpflichtungserklärung muss die visumgesuchstellende Person nachweisen, dass sie Inhaberin einer zweckmässigen und gültigen Reisekrankenversicherung ist (Art. 10 Abs. 1 VEV). Die Vertretung verzichtet auf den Abschluss einer Reisekrankenversicherung, wenn die gastgebende Person oder der Garant in der Schweiz eine Reisekrankenversicherung in Namen der gesuchstellenden Person unterzeichnet hat.
- Die Reisekrankenversicherung muss allfällige Kosten eines Rücktransports ins Herkunftsland aus medizinischen Gründen, die Kosten einer medizinischen Behandlung und/oder dringender Spezialbehandlungen decken. Die Minimaleckung dieser Kosten ist € 30'000.-.

#### 6. Weitergabe von persönlichen Daten an Dritte

- In Kenntnis der Sachlage willige ich ein, dass Daten, welche ich in der Verpflichtungserklärung über meine Person angegeben habe, an Dritte weitergegeben werden dürfen. Es handelt sich dabei um Dritte, denen der Visuminhaber nicht erstattete Beträge schuldet. Die Verpflichtungserklärung umfasst nicht gedeckte Kosten, welche der Öffentlichkeit oder privaten Leistungserbringern während des Aufenthalts des Visuminhabers anfallen. Darunter fallen Unterhaltskosten inklusive Kosten für Krankheit oder Unfall sowie die Kosten für die Rückkehr (Art. 8 Abs. 1 VEV). Der Begriff "Dritte" beinhaltet unter anderem die Behörden von Bund, Kantonen und Gemeinden, Institutionen des öffentlichen Rechts und private Leistungserbringer.

Das unterzeichnete Formular ist zur Kontrolle an die zuständige kantonale oder kommunale Migrationsbehörde weiterzuleiten. Die schweizerische Vertretung wird über das Ergebnis der Kontrolle orientiert. Auskünfte erteilen die kantonalen Migrationsbehörden und das Staatssekretariat für Migration (SEM) (Tel. +41 58 465 11 11).



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Schweizerische Vertretung / Migrationsbehörde / Grenzposten

N° ORBS 4  
N° ORBS 5  
N° ORBS 6  
N° ORBS 7

N° ORBS 8  
N° ORBS 9  
N° ORBS 10



## Zusatzblatt

### Verpflichtungserklärung (Artikel 7, 8 und 9 der Verordnung über die Einreise und die Visumerteilung, VEV, RS 142.204)

Bitte Hinweise sorgfältig lesen. Bitte blauen oder schwarzen Kugelschreiber verwenden und in Blockschrift ausfüllen.

#### 1. Besucherin (Garantnehmerin) Durch die eingeladene(n) Person(en) auszufüllen

Name	4	5	6	7
Vorname(n)	4	5	6	7
Geburtsdatum (Tag/Monat/Jahr)	4	5	6	7
Nationalität(en)	4	5	6	7
Pass-Nr.	4	5	6	7
Strasse, Nr.	4	5	6	7

Wohnort / Land	4	5	6	7
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Name	8	9	10
Vorname(en)	8	9	10
Geburtsdatum (Tag/Monat/Jahr)	8	9	10
Nationalität(en)	8	9	10
Pass-Nr.	8	9	10
Strasse, Nr.	8	9	10

Wohnort / Land	8	9	10
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#### 2. Garant/in

Name: \_\_\_\_\_ Vorname: \_\_\_\_\_

Der Garant/die Garantin	Ort	Datum	Unterschrift
<input type="checkbox"/> Der Ehegatte/Die Ehegattin			
<input type="checkbox"/> Der/Die eingetragene Partner/in	Ort	Datum	Unterschrift





Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Représentation suisse / Autorité compétente en matière de migration / Organe de contrôle à la frontière

N° ORBIS 1  
N° ORBIS 2  
N° ORBIS 3

Une assurance médicale de voyage  
souscrite par le garant au nom du visiteur  
est exigée  
 Oui  Non

Timbre

## Déclaration de prise en charge (articles 7, 8 et 9 de l'ordonnance sur l'entrée et l'octroi des visas, OEV, RS 142.204)

Veuillez lire attentivement les instructions, Utiliser un stylo à bille bleu ou noir et écrire en lettres majuscules.

1. Visiteurs* (bénéficiaires de la garantie)		A remplir par la (les) personne(s) invitée(s)	
Nom :	1	2	3
Prénom(s)	1	2	3
Date de naissance (Jour/mois/année) :	1	2	3
Nationalité(s) :	1	2	3
N° de passeport :	1	2	3
Rue, n° :	1	2	3
Lieu / Pays	1	2	3

Séjour prévu du ..... au ..... soit ..... jours

\*Pour les familles ou groupes de plus de 3 personnes, mais au maximum 10 personnes, veuillez inscrire les données des autres visiteurs sur le feuillet additionnel prévu à cet effet.

## 2. Garantie A remplir par la (les) personne(s) invitée(s) et à compléter et à signer par le/la garant/e

Nom :	Prénom :	Date de naissance :
Nationalité :	Titre de séjour :	<input type="checkbox"/> B <input type="checkbox"/> C N° SYMIG :
Rue, n° :	NPA, Lieu :	

Déclaration du/de la garant/e: Je m'engage / Nous nous engageons à assumer, jusqu'à concurrence de 30 000 francs suisses, les frais de subsistance non couverts à charge des autorités compétentes de la Confédération, des cantons et des communes ou de fournisseurs privés de prestations médicales occasionnés pendant le séjour de la/des personne/s mentionnée/s sous chiffre 1 (frais d'accident, de maladie et de retour compris). La déclaration de prise en charge est irrévocable. J'accepte/nous acceptons les autres conditions exposées au verso de ce formulaire.

Le/la garant/e :	Lieu :	Date :	Signature :
(1) Le/la conjoint/e :			
(2) Le/la partenaire enregistré/e :	Lieu :	Date :	Signature :

## 3. Préavis du service cantonal ou communal compétent

Le service compétent déclare qu'à son avis, le/la garant/e est à même de respecter ses engagements financiers:

Oui  Non

Si une assurance médicale de voyage souscrite par le garant au nom du demandeur de visa est exigée (cf. rubrique en haut à droite), le service compétent déclare que cette assurance médicale de voyage est adéquate au sens de l'art. 10, al. 1 OEV:

Oui  Non

Observations:

Signature et timbre :

La déclaration de prise en charge n'est valable que si elle est munie du timbre officiel et de la signature du service cantonal ou communal compétent ou d'un organe de contrôle à la frontière.

#### 4. Etendue de la déclaration de prise en charge et indications importantes

- Pour contrôler les conditions d'entrée et les modalités du séjour de l'étranger, les autorités compétentes en matière d'autorisation peuvent exiger la présentation d'une déclaration de prise en charge signée par une personne physique ou morale solvable en Suisse (ci-après le garant). Peuvent se porter garants des ressortissants suisses ou de la Principauté de Liechtenstein résidant dans ces deux Etats, ainsi que des étrangers titulaires d'une autorisation de séjour (art. 33 de la loi fédérale sur les étrangers, LEtr, RS 142.20) ou d'établissement (art. 34 LEtr) valable.
- Le garant s'engage pour un maximum de dix personnes entrant ensemble sur le territoire Suisse et quittant ce dernier ensemble (art. 8, al. 5, OEV).
- En signant cette déclaration de prise en charge, le garant s'engage à assumer les frais non couverts à charge de la collectivité ou de fournisseurs privés de prestations médicales pendant le séjour de l'étranger, soit les frais de subsistance, frais de maladie et d'accident compris, ainsi que les frais de retour (art. 8, al. 1, OEV), au sens d'une reconnaissance de dette irrévocable fixée à 30 000 francs.
- La prise en charge commence à la date de l'octroi du visa ou de l'entrée (déclaration de prise en charge à la frontière) et prend fin lorsque l'étranger quitte la Suisse, mais au plus tard douze mois après son entrée. Le remboursement des frais non couverts survenus durant cette période peut être exigé pendant cinq ans à compter de la naissance de ces frais (art. 8, al. 3, 3bis et 4 OEV).
- En vue de vérifier l'identité et les informations données, les autorités compétentes peuvent exiger notamment les documents suivants:
  - pièces d'identité et livrets pour étrangers,
  - extraits du registre des poursuites pour dettes et faillites,
  - décomptes du salaire,
  - justificatifs bancaires,
  - taxations fiscales.
- Le garant prend acte du fait que les autorités compétentes peuvent consulter les registres des poursuites et des impôts et se renseigner auprès des autorités de police (art. 9 OEV).
- Un préavis positif des autorités cantonales concernant la déclaration de prise en charge ne confère aucun droit à la délivrance d'un visa.
- Aucune voie de recours n'existe suite à un préavis négatif des autorités cantonales compétentes concernant la présente déclaration de prise en charge. Seul le refus de délivrer un visa par la représentation peut faire l'objet d'une opposition écrite, dans un délai de 30 jours à compter de sa notification, auprès du Secrétariat d'Etat aux migrations, Quellenweg 6, CH-3003 Berne-Wabern (art. 6, par. 2bis, LEtr). Lorsqu'un étranger n'est pas soumis à l'obligation du visa et qu'il n'est pas citoyen d'un Etat membre de l'AELE ou de l'UE, une déclaration de prise en charge peut être exigée par les autorités à la frontière (art. 7, al. 2, OEV). La prise en charge est alors valable pendant douze mois (art. 8, al. 3bis, OEV par analogie).

#### 5. Indications concernant l'assurance médicale de voyage

- Indépendamment de la procédure de prise en charge, le demandeur de visa doit prouver qu'il est titulaire d'une assurance médicale de voyage adéquate et valide (art. 10, al. 1 OEV). La représentation renonce à exiger l'assurance médicale de voyage lorsque l'hôte ou le garant en Suisse a souscrit une telle assurance au nom du demandeur de visa.
- L'assurance doit couvrir les éventuels frais de rapatriement pour raisons médicales, de soins médicaux d'urgence et/ou de soins hospitaliers urgents. La couverture minimale de ces frais doit être de 30'000 €.

#### 6. Transmission des données personnelles à des tiers

- En connaissance de cause, je consens à ce que les données personnelles me concernant qui figurent dans le présent formulaire de déclaration de prise en charge soient communiquées aux tiers auxquels les prestations dues par le titulaire du visa n'ont pas été remboursées. La déclaration de prise en charge englobe les frais non couverts à la charge de la collectivité ou de fournisseurs privés de prestations médicales pendant le séjour de l'étranger, soit les frais de subsistance, frais de maladie et d'accident compris, ainsi que les frais de retour (art. 8, al. 1 OEV). Le terme de tiers comprend, entre autres, les autorités fédérales, cantonales ou communales, les institutions de droit public, et les fournisseurs privés de prestations médicales.

Le formulaire signé sera envoyé en vue d'un contrôle aux autorités cantonales ou communales compétentes en matière de migration. La représentation suisse sera informée du résultat de ce contrôle. Pour tout renseignement supplémentaire, prière de s'adresser aux autorités cantonales compétentes en matière de migration ou au Secrétariat d'Etat aux migrations (SEM) [Tél. +41 58 465 11 11].



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun Svizra

Représentation suisse / Autornel compëntenta en matêre de migration / Organo de cuntrôls à la frontêra

N° ORBIS 4  
N° ORBIS 5  
N° ORBIS 6  
N° ORBIS 7

N° ORBIS 8  
N° ORBIS 9  
N° ORBIS 10

Timbre

## Feuillet additionnel

### Déclaration de prise en charge (articles 7, 8 et 9 de l'Ordonnance sur l'entrée et l'octroi des visas, OEV, RS 142 204)

Veuillez lire attentivement les instructions. Utiliser un stylo à bille bleu ou noir et écrire en lettres majuscules.

1. Visiteurs (bénéficiaires de la garantie)		A remplir par la (les) personne(s) invitée(s)	
Nom :	4	5	6
Prénom(s)	4	5	6
Date de naissance (Jour/mois/année) :	4	5	6
Nationalité(s) :	4	5	6
N° de passeport :	4	5	6
Rue, n°	4	5	6
Lieu / Pays :	4	5	6
Nom :	8	9	10
Prénom(s)	8	9	10
Date de naissance (Jour/mois/année) :	8	9	10
Nationalité(s)	8	9	10
N° de passeport :	8	9	10
Rue, n°	8	9	10
Lieu / Pays :	8	9	10
2. Garant/e			
Nom		Prénom	
Le/la garant/e :	Lieu	Date :	Signature :
<input type="checkbox"/> Le/la conjoint/e	Lieu	Date :	Signature :
<input type="checkbox"/> Le/la partenaire enregistré/e	Lieu	Date :	Signature :





Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Rappresentanza svizzera / Autorità competente in materia di migrazione / Organo di controllo alla frontiera

N. ORBIS 1  
N. ORBIS 2  
N. ORBIS 3

È richiesta un'assicurazione sanitaria di viaggio stipulata dal garante a nome del visitatore

Sì  No

Timbro

## Dichiarazione di garanzia (art. 7, 8 e 9 dell'ordinanza concernente l'entrata e il rilascio del visto, OEV, RS 142.204)

Pregasi di leggere dapprima le istruzioni sul retro e di completare il modulo in stampatello con una penna a sfera blu o nera.

### 1. Visitatore/i\* (beneficiari(o) della garanzia) Questa parte dev'essere compilata dalla(e) persona(e) invitata(e)

Cognome/i	1	2	3
Nome/i	1	2	3
Data di nascita (giorno/mese/anno)	1	2	3
Nazionalità	1	2	3
N. del passaporto	1	2	3
Via, n.	1	2	3
.....			
Luogo di residenza / Paese	1	2	3

Soggiorno previsto dal ..... al ..... ossia ..... giorni

\*Per le famiglie o i gruppi di oltre 3 persone ma al massimo 10 persone, pregasi di indicare i dati degli altri visitatori sull'apposito foglio aggiuntivo.

### 2. Garante Questa parte d'essere compilata dalla(e) persona(e) invitata(e) nonché completata e firmata dal garante

Cognome:	Nome:	Data di nascita:
Nazionalità:	Titolo di soggiorno:	<input type="checkbox"/> B <input type="checkbox"/> C N. SIMIC:
Via, n.	NAP. Località:	

Dichiarazione del garante: Io sottoscritto (noi sottoscritti) mi impegno (ci impegniamo) irrevocabilmente a rimborsare fino a un importo di 30 000 franchi svizzeri le spese scoperte per il sostentamento (inclusi infortunio o malattia, nonché per il rimpatrio) occasionate alle competenti autorità federali, cantonali o comunali nonché a fornitori privati di prestazioni mediche dal soggiorno della(e) persona(e) indicata(e) alla cifra 1. Accetto (accettiamo) inoltre le ulteriori condizioni elencate alla pagina seguente del presente modulo.

Il garante:	Luogo:	Data:	Firma:
<input type="checkbox"/> Il coniuge.			
<input type="checkbox"/> Il partner registrato.	Luogo:	Data:	Firma:

### 3. Preavviso dell'ufficio cantonale o comunale competente

L'ufficio cantonale competente dichiara che, a suo giudizio, il garante è in grado di adempiere agli obblighi finanziari assunti:

Sì  No

Qualora il garante abbia stipulato un'assicurazione sanitaria di viaggio a nome del richiedente (cfr. rubrica in alto a destra), la competente autorità dichiara che l'assicurazione sanitaria di viaggio è adeguata ai sensi dell'articolo 10 capoverso 1 OEV.

Sì  No

Osservazioni:

Firma e timbro

La dichiarazione di garanzia è valida unicamente se munita del timbro ufficiale e della firma dell'ufficio cantonale o comunale competente o di un organo di controllo alla frontiera.

#### 4. Portata della dichiarazione di garanzia e indicazioni importanti

- Per il controllo delle condizioni d'entrata e delle circostanze del soggiorno di uno straniero, l'autorità competente per il rilascio del visto può richiedere la dichiarazione di garanzia firmata da una persona solvibile fisica o giuridica iscritta nel registro di commercio (garante) in Svizzera. Possono prestare garanzia unicamente i cittadini svizzeri o del Principato del Liechtenstein che risiedono in uno dei due Stati o gli stranieri titolari di un permesso di dimora (art. 33 della legge federale sugli stranieri, LStr, RS 142.20) o di domicilio valido (art. 34 LStr).
- Per ogni dichiarazione di garanzia, il garante può impegnarsi per un massimo di 10 persone che entrano o escono in gruppo (art. 8 cpv. 5 OEV).
- Firmando tale dichiarazione di garanzia, il garante si impegna irrevocabilmente, a mo' di riconoscimento di debito, a rimborsare fino ad un importo di 30 000 franchi le spese scoperte per il sostentamento, inclusi l'infortunio e la malattia, nonché per il rimpatrio, occasionate alla comunità o a fornitori privati di prestazioni mediche dal soggiorno dello straniero (art. 8 cpv. 1 OEV).
- L'obbligo ha effetto a partire dalla data di rilascio del visto o dell'entrata (dichiarazione di garanzia alla frontiera) e si estingue con la partenza dello straniero dalla Svizzera, al più tardi però 12 mesi dopo l'entrata. Le spese scoperte occasionate durante tale periodo possono essere fatte valere per i cinque anni successivi al loro insorgere (art. 8 cpv. 3, 3<sup>bis</sup> e 4 OEV).
- Per accertare l'identità e verificare i dati forniti, le autorità competenti possono esigere segnatamente i seguenti attestati:
  - documenti d'identità e carte di soggiorno;
  - estratti del casellario giudiziale e dell'ufficio delle esecuzioni;
  - conteggio del salario;
  - estratti dei conti in banca;
  - estimazione dell'imponibile.
- Il garante autorizza le autorità competenti a raccogliere pertinenti informazioni presso i registri d'esecuzione e fiscali nonché presso le autorità di polizia (art. 9 OEV).
- Un preavviso favorevole delle autorità cantonali concernente la dichiarazione di garanzia non conferisce il diritto al rilascio del visto.
- Il preavviso negativo della competente autorità cantonale concernente la dichiarazione di garanzia non è impugnabile. È possibile fare opposizione scritta soltanto contro il rifiuto della rappresentanza di rilasciare il visto. L'opposizione va presentata, entro 30 giorni dalla notifica del rifiuto, alla Segreteria di Stato della migrazione, Quellenweg 6, CH-3003 Berna-Wabern (art. 6 cpv. 2<sup>us</sup> LStr). Nel caso di stranieri non soggiacenti all'obbligo del visto e non cittadini di Stati dell'AELE o dell'UE, gli organi di controllo alla frontiera possono richiedere la dichiarazione di garanzia (art. 7 cpv. 2 OEV). L'obbligo finanziario di tale dichiarazione di garanzia vige per 12 mesi (per analogia all'art. 7 cpv. 2 OEV).

#### 5. Indicazioni relative all'assicurazione sanitaria di viaggio

- A prescindere dalla procedura di dichiarazione di garanzia, la persona che richiede il visto deve dimostrare di essere titolare di un'assicurazione sanitaria di viaggio adeguata e valida (art. 10 cpv. 1 OEV). La rappresentanza rinuncia a esigere la stipula di un'assicurazione sanitaria di viaggio se l'ospite o il garante in Svizzera ha già stipulato un'assicurazione di viaggio a nome del richiedente.
- L'assicurazione sanitaria di viaggio deve coprire eventuali spese di rimpatrio per motivi medici, di soccorso medico o di cure ospedaliere d'emergenza. La copertura minima è di 30 000 euro.

#### 6. Comunicazione di dati personali a terzi

- Conoscendo appieno lo stato delle cose, acconsento a che i dati personali che mi concernono, figuranti nel presente modulo di dichiarazione di garanzia, siano comunicati ai terzi cui le prestazioni dovute dal titolare del visto non sono state rimborsate. La dichiarazione di garanzia copre le spese per il sostentamento e il ritorno, comprese quelle per infortunio e malattia, che il soggiorno dello straniero coglie alla comunità o ai fornitori privati di prestazioni mediche (art. 8 cpv. 1 OEV). Per terzi s'intendono tra gli altri le autorità federali, cantonali o comunali, le istituzioni di diritto pubblico e i fornitori privati di prestazioni.

Il modulo firmato va inviato per il controllo all'autorità cantonale o comunale competente in materia di stranieri. La rappresentanza all'estero è informata dell'esito del controllo. Le autorità cantonali competenti in materia di stranieri e alla Segreteria di Stato della migrazione (SEM) (tel. +41 68 465 11 11) sono a vostra disposizione per eventuali informazioni supplementari.



## Foglio aggiuntivo

### Dichiarazione di garanzia (art. 7, 8 e 9 dell'ordinanza concernente l'entrata e il rilascio del visto, OEV, RS 142.204)

Pregasi di leggere dapprima le istruzioni sul retro e di completare il modulo in stampatello con una penna a sfera blu o nera.

#### 1. Visitatore/i\* (beneficiari(o) della garanzia) Questa parte deve essere compilata dalla(e) persona(e) invitata(e)

Cognome/i: 4 5 6 7

Nome/i: 4 5 6 7

Data di nascita (giorno/mese/anno): 4 5 6 7

Nazionalità: 4 5 6 7

N. del passaporto: 4 5 6 7

Via, n.: 4 ..... 5 ..... 6 ..... 7 .....

Luogo di residenza / Paese: 4 5 6 7

Cognome/i: 8 9 10

Nome/i: 8 9 10

Data di nascita (giorno/mese/anno): 8 9 10

Nazionalità: 8 9 10

N. del passaporto: 8 9 10

Via, n.: 8 ..... 9 ..... 10 .....

Luogo di residenza / Paese: 8 9 10

#### 2. Garante

Cognome: Nome:

Il garante: Luogo: Data: Firma:

Il coniuge: Luogo: Data: Firma:

Il partner registrato: Luogo: Data: Firma:

**Specimen of Spain's form of providing proof of sponsorship  
and/or private accommodation**

As provided for in the Spanish law, this form has been drafted in the following languages:

1. Castilian
2. Castilian and Catalan
3. Castilian and Basque
4. Castilian and Galician
5. Castilian and Balear
6. Castilian and Valencian

<b>REINO DE ESPAÑA</b> Royaume d'Espagne Kingdom of Spain	<b>ESPAÑA</b> <b>CARTA DE INVITACION</b> <b>ATTESTATION D'ACCUSE/LETTER OF INVITATION</b>		N° <b>00000000</b>
	Yo, el/la solicitante, he/s he/she requiero/s I/we applicant Nombre/Nom (s)/First Name <span style="float: right;">Apellidos/ Nom/ Surnames</span>		
Lugar y fecha de nacimiento/Lieu et date de naissance/Place and date of birth			
Para información de los/as solicitantes de los artículos 3 y 25 del Reglamento de la Ley Orgánica, suscitador de el Real Decreto 2153/2004, de 10 de diciembre, relativo a las condiciones de acceso de los extranjeros a España.  Para información de los/as solicitantes de los artículos 3 y 25 de la Ley Orgánica, suscitador de el Real Decreto 2153/2004, de 10 de diciembre, relativo a las condiciones de acceso de los extranjeros a España.  For information of the applicant of articles 3 and 25 of the Organic Law, promoter of the Royal Decree 2153/2004, of 10 December, relating to the conditions of access of foreigners to Spain.  For information of the applicant of articles 3 and 25 of the Organic Law, promoter of the Royal Decree 2153/2004, of 10 December, relating to the conditions of access of foreigners to Spain.	Nacionalidad/nationality/nationalité		
Número D.N.I.-Pasaporte-Tarjeta de Identidad o número de Identificación de Extranjeros/Numéro de la Carte nationale d'identité - titre de séjour ou numéro d'identification d'étranger / ID, Passport, Residence Permit, number or Alien Identity Number			
Domicilio completo/Adresse/Address			
Dependencia que lo explica: Autoridad Pública competidora o Issuing Authority:	Me comprometo ante los Servicios policiales/Representación Diplomática de alojamiento de/s/ I hereby declare before Police Authorities/Diplomatic Representation of the (s)		
Nombre/First name <span style="float: right;">Apellidos/Last names</span>			
Lugar y fecha de nacimiento/Lieu et date de naissance/Place and date of birth			
Nacionalidad/nationality/nationalité			
Pasaporte n°/Passport n°/Passport n°			
Domicilio completo/Adresse/Address			
Vínculo o relación con el solicitante/Lien de parenté, si il y a lieu, de l'applicant de l'attestation d'étranger avec le demandeur précité./ Relationship with the applicant.			
Acompañado/a del/ Accompanied by			
Duración de la invitación desde el día... hasta el... /Duration of the invitation from... to...			
La validez de la presente carta de invitación se extenderá durante los nueve meses siguientes a la notificación de la resolución./ Cette attestation d'accuse a une validité de neuf mois à compter de sa notification./ This letter of invitation will be valid during the nine months following the notification of the granting.			
Declara que la información expuesta es verdadera./ J'atteste que l'ensemble des renseignements fournis est véridique./ I hereby state the veracity of the information given.			
El/Invitador, fecha y firma./ L'invitant, date et signature / The host, date and signature.	Dependencia policial, fecha, firma y sello./ Autorité publique compétente, date, signature et sceau./ Police authority, date, signature and official stamp.		
Autoridad Consular, fecha y sello./ Autorité consulaire, date et sceau./ Consular authority, date and official stamp.	Puesto invitado/a a girar el formulario consular, fecha y sello./ Les services de consularité et/ou de visas des ambassades et postes diplomatiques d'Espagne des consulats étrangers, date et sceau/ stamp.		

**Advertencias**  
**Advertencias**  
**Be advised that**

a) El Código Penal, aprobada por la Ley Orgánica 10/1995, de 23 de noviembre de 1995, tipifica como delito, en el artículo 318, bis así que directa o indirectamente, promover, favorecer o facilitar el tráfico ilegal o la inmigración clandestina de personas desde, en tránsito o con destino a España, será castigado con la pena de cuatro a ocho años de prisión.

*Le Code Penal, Loi Organique 10/1995, du 23 novembre 1995, à l'article 318 bis, établit comme délit que: «toute personne qui par aide directe ou indirecte, promeuve, favorise ou facilite le trafic illégal ou l'immigration irrégulière de personnes à destination, en transit, ou depuis l'Espagne, vers toute d'un emplacement de quatre à huit ans».*

*The Criminal Code promulgated by Organic Law 10/1995, of 23rd November, 1995, criminalized in Article 318, bis that: «those who direct or indirectly furnish, promote or facilitate illegal human traffic or smuggling of immigrants from, through or towards Spain, will be punished with penalties from 4 to 8 years of imprisonment».*

b) La Ley Orgánica 4/2000, de 11 de enero, sobre derechos y libertades de los extranjeros en España y su integración social, considera infracción muy grave «inducir, promover, favorecer o facilitar con ánimo de lucro, individualmente o formando parte de una organización, la inmigración clandestina de personas en tránsito o con destino al territorio español o su permanencia en el mismo, siempre que no constituya delito», pudiendo imponerse sanción de multa desde 6.001 hasta 60.000 euros o expulsión del territorio nacional, con prohibición de entrada por un período de tres a diez años, tal como disponen sus artículos 54.1.A), 55.1.c) y 57.1 de la citada Ley Orgánica 4/2000, de 11 de enero.

*La Loi Organique 4/2000, du 11 janvier, concernant les droits et libertés des étrangers en Espagne et leur intégration sociale, considère comme une infraction très grave le fait de: «induire, de promouvoir, de favoriser ou de faciliter, avec un but lucratif, individuellement ou en bande organisée, l'immigration irrégulière de personnes en transit ou à destination du territoire espagnol ou son séjour en Espagne, quand il s'agit pas considéré comme un délit». Elle prévoit une amende de 6.001 à 60.000 euros ou l'expulsion du territoire national, avec interdiction d'entrée pendant une période de trois à dix ans, prévu dans les articles 54.1.A), 55.1.c) et 57.1 de la Loi Organique 4/2000, du 11 janvier, mentionnés précédemment».*

*The Organic Law 4/2000, of 11th January, on Rights and Freedoms of Aliens in Spain and Their Social Integration, considers as a very serious crime: «to persuade, promote, contribute or facilitate in order to obtain some profit, individually or being part of an organization, clandestine immigration of persons moving through or towards Spanish territory or to stay in it, provided that this is not a crime». A penalty from 6,001 to 60,000 Euros or the deportation from Spain with an entry prohibition during a period from three to ten years, under article 54.1.A), 55.1.c) and 57.1 of the mentioned Organic Law 4/2000, of 11th January can be imposed».*

c) Los datos relativos a la identidad, número de pasaporte, nacionalidad y residencia, tanto del invitado como del invitante, serán incorporados a un fichero de la Dirección General de la Policía y de la Guardia Civil, pudiendo ejercerse los derechos de acceso, rectificación y cancelación ante la Comisión General de Estadística y Documentación, de conformidad con lo establecido en la Ley Orgánica 15/1999, de 13 de diciembre, de protección de datos de carácter personal.

*Les données relatives à l'identité, au numéro de passeport, à la nationalité et à la résidence de l'invité et de l'organisateur, seront introduites dans un fichier de la Direction Générale de la Police et de la Guardia Civil. Un droit d'accès, de rectification et d'annulation de ces données, auprès de la Commission Générale de Statistique et de Documentation, est garanti par la Loi Organique 15/1999, du 13 décembre, relative à la protection de données à caractère personnel».*

*These data related to identity, passport number, nationality and residence, both of the host and the guest, will be incorporated in a file of the Dirección General de la Policía and the Guardia Civil. The rights of access, correction and cancellation of these data before the General Department of Aliens and Documents, in accordance with Organic Law 15/1999, of 13th December on the Protection of Personal Data».*

Specimen of Finland's form of providing proof of sponsorship and/or private accommodation

# ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



Ulkoministeriö  
Utrikesministeriet  
Ministry for Foreign  
Affairs of Finland

## Uppgifter om inbjudaren om det är fråga om ett företag eller en sammanslutning:

Företagets/sammanslutningens namn		FO-nummer:	
Adress	Stad	Postnummer	
Kontaktpersonens namn		Kontaktpersonens telefonnummer	
Kontaktpersonens e-postadress			
Kontaktpersonens ställning i företaget/sammanslutningen			

## Uppgifter om den sökande

Efternamn	Förnamn		
Adress i det permanenta bosättningslandet			
Postnummer	Stad	Land	
E-postadress		Telefonnummer	
Passnummer, utfärdande stat		Beskickning där den sökande ansöker om visum	

## Uppgifter om inbjudarens bostad och arbetsplats. Ifylls om den sökande är en privatperson.

Boendeform <input type="checkbox"/> ägarbostad <input type="checkbox"/> hyresbostad <input type="checkbox"/> annan, vad?	
Boendekostnader/månad	Bostadens storlek och invånarantal

# ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



Ulkoministeriö  
Utrikesministeriet  
Ministry for Foreign  
Affairs of Finland

Arbetsgivare	Yrke, uppgift
Löneinkomster före skatt per år	Löneinkomster efter skatt per år
Övriga inkomster, €/år efter skatt	Startdatum för anställningsförhållande
Anställningsförhållandets form <input type="checkbox"/> ordinarie <input type="checkbox"/> tidsbundet, till?	

## Uppgifter om resan

Planerad längd och tidpunkt för resan
Resans syfte och planerade program
Var bor den sökande under resan? Ange adressen till login.
Reser andra personer med den sökande, vilka? Täcker åtagandeförklaringen även deras kostnader? Var bor de under resan? <i>Fyll i de övriga sökandes fullständiga namn och födelsedatum.</i>
Vem står för den sökandes kostnader under resan? Hur har medlen förvärvats? Hur stort belopp har reserverats för den sökandes kostnader? Står den sökande själv för några kostnader? <i>Obs! Det belopp som krävs för en person som reser till Finland är minst 50 euro/resedag.</i>

## ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



Ulkoministeriö  
Utrikesministeriet  
Ministry for Foreign  
Affairs of Finland

Betalar den sökande själv resorna till Finland?

Ja. Den sökande bifogar sitt kontoutdrag av vilket framgår tillräckliga medel för inköp av resebiljetter.

Nej. Inbjudaren står för resekostnaderna.

### Förhållande mellan inbjudaren och den sökande:

Är den sökande släkt med inbjudaren? Om ja, specificera släktförhållandet. Till ansökan ska bifogas en redogörelse för släktskap.

Ja, specificera förhållandets karaktär:

Nej, specificera hur den sökande och inbjudaren känner varandra:

Har inbjudaren och den sökande träffat tidigare? Om ja, var och när senast?

Om inbjudaren och den sökande inte är släkt med varandra, hur känner ni varandra? Hur länge har ni känt varandra?

Jag intygar med min underskrift att de uppgifter som jag angett i blanketten och bilagorna är riktiga. Jag försäkrar att jag av min egen vilja förbinder mig till den visumsökandes uppehälle och/eller logi.

Jag vet att lämnande av oriktiga personuppgifter och ingivande av osant intyg till myndigheterna i Finland är straffbart enligt strafflagen, och att lämnande av oriktiga uppgifter kan leda till att visumet inte utfärdas eller det utfärdade visumet återkallas, nekad inresa och meddelande av inreseförbud som gäller Schengenområdet.

Jag är medveten om att mina personuppgifter som jag angett på denna ansökningsblankett insänds till medlemsstaternas behöriga myndigheter för att fatta beslut om visumansökan och säkerställa villkoren för inresa.

Dessa uppgifter införs och sparas i visuminformationssystemet (VIS) för högst fem år. Under den tiden kan uppgifterna granskas av viseringsmyndigheter och myndigheter med befogenhet att utföra visumkontroller vid de yttre gränserna och på medlemsstaternas territorium och medlemsstaternas invandrings- och asylmyndigheter för att kontrollera om de villkor som gäller laglig inresa, vistelse och lagligt boende i medlemsstaterna uppfylls och för att identifiera de personer som inte (längre) uppfyller dessa villkor samt för att granska asylansökningar och fastställa den stat som ansvarar för deras behandling. Uppgifterna kan på vissa villkor användas även av de myndigheter som medlemsstaterna utsett och Europol för att bekämpa, upptäcka och undersöka terroristbrott och andra grova brott.



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Ministry for Foreign  
Affairs of Finland

**Fill in this proof of sponsorship if you wish to invite family or friends to Finland for up to 90 days and take responsibility for their travel costs and/or accommodation during the stay. Persons planning to stay in Finland for over 90 days must apply for a residence permit. Read more about applying for a residence permit at <https://migri.fi/en/home>.**

**Attach the necessary documents (see the last page) to the form and ask the visa applicant to attach this form and its attachments to the visa application. Please note that a notary public must certify the authenticity of your signature. If your signature has not been authenticated, the form cannot be taken into account in the consideration of a decision.**

**The proof of sponsorship does not guarantee the issue of a Schengen visa. The conditions for entry are separately assessed upon arrival in the country, when the applicant must, if requested by border control authorities, provide proof of sufficient funds or a proof of sponsorship.**

**This agreement concerns:**

- maintenance of the visa applicant, but not accommodation
- accommodation of the visa applicant, but not other maintenance
- accommodation and maintenance of the visa applicant.

**Details of the inviting party if a private person:**

Surname	Forenames		
Address		City	Postal code
Telephone number	Email address		
Personal identity code	Citizenship		
Type and period of validity of residence permit if citizenship other than Finnish			
Relationship to the visa applicant			

PROOF OF SPONSORSHIP TO BE ATTACHED TO VISA APPLICATION



Ulkoministeriö  
Utrikesministeriet  
Ministry for Foreign  
Affairs of Finland

**Details of the inviting party if a company or corporation:**

Name of company/corporation		Business ID:	
Address	City	Postal code	
Contact person		Contact person's phone number	
Contact person's email address			
Contact person's position in company/corporation			

**Details of applicant**

Surname	Forenames		
Address in the country of permanent residence			
Postal code	City	Country	
Email address		Telephone number	
Passport number, country of issue		Mission from which a visa is applied for	

**Details of the inviting party's place of residence and workplace. Please fill in if the applicant is a private person.**

Type of housing <input type="checkbox"/> owner-occupied dwelling <input type="checkbox"/> rental dwelling <input type="checkbox"/> other, what?	
Housing costs/month	Size of dwelling and number of occupants

PROOF OF SPONSORSHIP TO BE ATTACHED TO VISA APPLICATION



Ulkoministeriö  
Utrikesministeriet  
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Employer	Occupation, position
Annual earned income before tax	Annual earned income after tax
Other income, €/year after tax	Start date of employment relationship
Form of employment relationship <input type="checkbox"/> permanent <input type="checkbox"/> fixed-term, until when?	

**Travel information**

Planned duration and time of trip
Purpose of the trip and planned programme
Where will the applicant stay during the trip? Please give the address of accommodation.
Will the applicant be accompanied by other persons, who? Does the maintenance agreement cover their costs as well? Where will they stay? <i>Fill in the full name and date of birth of the other applicants.</i>
Who is responsible for the applicant's costs during the trip? How have the funds been acquired? How much has been reserved for the applicant's costs? Will the applicant be responsible for any costs? <i>Please note: For persons travelling to Finland, at least EUR 50/day of travel is required.</i>

PROOF OF SPONSORSHIP TO BE ATTACHED TO VISA APPLICATION



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Does the applicant pay for travel costs to Finland?

Yes. The applicant will attach a bank statement to this form showing sufficient funds for the purchase of tickets.

No. The inviting party is responsible for travel costs.

**Inviting party's relationship to the applicant:**

Is the applicant related to the inviting party? If so, specify family relationship. Evidence of family relationship must be attached to the application.

Yes, specify the nature of relationship:

No, specify how the applicant and the inviting party know each other:

Have the inviting party and the applicant met before? If so, where and when did they last meet?

If the inviting party and the applicant are not related, how do you know each other? How long have you known each other?

By signing this form, I confirm that the information I have provided in the form and appendices is true and correct. I declare that I undertake to maintain and/or accommodate the visa applicant of my own free will.

I am aware that giving false personal data and false written certificate to the authorities in Finland is a punishable act under the Criminal Code and that providing false information may lead to a refusal or revocation of a visa, refusal of entry and imposition of an entry ban to the Schengen area.

I am aware that any personal data concerning me that appear on the application form will be supplied to the relevant authorities of the Member States for deciding the visa application and verifying the fulfilment of entry conditions.

Such data 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.

PROOF OF SPONSORSHIP TO BE ATTACHED TO VISA APPLICATION



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The authority of the Member State responsible for processing the data and acting as the controller is the Ministry for Foreign Affairs of Finland. Read more about the processing of your personal data and your rights as the data subject on our website at <https://um.fi/dataprotection>

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. 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.

Finland's Office of the Data Protection Ombudsman (<https://tietosuoja.fi/en/home>) will hear claims concerning the protection of personal data.

I understand that applicants who are granted a visa must undertake to leave the territory of the Member States before the expiry of the visa. I understand 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 a person does not mean that the person will be entitled to compensation if failing to comply with the relevant provisions of Article 6(1) of Regulation (EU) No 2016/399 (Schengen Borders Code) and therefore refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Member States.

Place	Date
Inviting party's signature	Inviting party's name in block letters

The signature is authenticated by:

If a notary public has not authenticated the signature, the form will not be taken into account in the processing of the visa application. Further information on the authentication of signature in Finland is available at <https://dvv.fi/en/notarisation-of-the-authenticity-of-a-signature>. Outside Finland, the Head of Mission and a person serving the mission appointed by the Head of Mission can authenticate the signature.



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**Attachments to the proof of sponsorship:**

- a copy of the inviting party's identity card
- a copy of the inviting party's residence permit if the inviting party is not a Finnish citizen
- a copy of the inviting party's employment contract
- a copy of the inviting party's last three months' payslips
- a copy of the inviting party's last three months' bank statements
- a copy of the possession of the dwelling (lease agreement, deed of sale, register of occupants, or similar)
- evidence of family relationship if the inviting party and the applicant are relatives
- details of previous meetings, if any (passport stamps, travel tickets, or similar)



## YLLÄPITOSITOUS VIISUMIHAKEMUKSEN LIITTEEKSI

**Täytä tämä ylläpitositoumus, mikäli haluat kutsua Suomeen sukulaisesi tai ystäväsi vierailulle alle 90 päiväksi ja haluat vastata hänen matkakuluistansa ja/tai majoituksesta matkan aikana. Jos hakija tulee Suomeen yli 90 päiväksi, tulee hänen hakea oleskelulupaa. Tietoja oleskeluluvan hakemisesta saa osoitteesta [www.migri.fi](http://www.migri.fi).**

**Liitä lomakkeeseen tarvittavat liitteet (ks. viimeinen sivu) ja pyydä viisuminhakijaa liittämään tämä lomake liitteineen viisumihakemuksen liitteeksi. Huomioi, että julkisen notaarin tulee todistaa allekirjoituksesi oikeaksi. Lomaketta ei voida ottaa huomioon päätösharkinnassa ilman oikeaksi todistettua allekirjoitusta.**

**Ylläpitositoumus ei takaa Schengen-viisumin myöntämistä. Maahantulon yhteydessä arvioidaan erikseen maahantulon edellytykset, jolloin hakijan on tarvittaessa pystyttävä esittämään riittävät varat tai ylläpitositoumus rajatarkastuksen yhteydessä.**

### Tämä sitoumus koskee

- viisuminhakijan ylläpitoa, ei kuitenkaan majoitusta.
- viisuminhakijan majoitusta, mutta ei muuta ylläpitoa.
- sekä viisuminhakijan majoitusta, että ylläpitoa.

### Kutsujan tiedot, mikäli kutsuja on yksityinen henkilö:

Sukunimi	Etunimet		
Osoite	Kaupunki	Postinumero	
Puhelinnumero	Sähköpostiosoite		
Henkilötunnus	Kansalaisuus		
Oleskeluluvan tyyppi ja voimassaoloaika, mikäli kansalaisuus muu kuin Suomi			
Suhde viisuminhakijaan			



YLLÄPITOSITOUMUS VIISUMIHAKEMUKSEN LIITTEEKSI

**Kutsujan tiedot, mikäli kutsuja on yritys tai yhteisö:**

Yrityksen/yhteisön nimi		Y-tunnus:	
Osoite	Kaupunki	Postinumero	
Yhteys henkilön nimi		Yhteys henkilön puhelinnumero:	
Yhteys henkilön sähköpostiosoite			
Yhteys henkilön asema yrityksessä/yhteisössä			

**Hakijaa koskevat tiedot**

Sukunimi	Etunimet		
Osoite pysyvässä asuinmaassa			
Postinumero	Kaupunki	Maa	
Sähköpostiosoite		Puhelinnumero	
Passin numero, myöntäjävaltio		Edustusto, josta viisumia haetaan	

**Kutsujan asuin- ja työpaikkaa koskevat tiedot. Täytetään mikäli hakija on yksityishenkilö.**

Asumismuoto <input type="checkbox"/> omistusasunto <input type="checkbox"/> vuokra-asunto <input type="checkbox"/> muu, mikä?	
Asumiskulut/kk	Asunnon koko ja asukasmäärä
Työnantaja	Ammatti, tehtävä
Palkkatulot ennen veroja vuodessa	Palkkatulot verojen jälkeen vuodessa
Muut tulot, €/vuodessa verojen jälkeen	Työsuhteen alkamispäivämäärä



YLLÄPITOSITOUKSEN VIISUMIHAKEMUKSEN LIITTEEKSI

Työsuhteen muoto

vakituinen  määräaikainen, mihin asti?

**Matkan tiedot**

Matkan suunniteltu kesto ja ajankohta

Matkan tarkoitus ja suunniteltu ohjelma

Missä hakija majoittuu matkan aikana? Yksilöi majoituspaikan osoite.

Matkustaako hakijan mukana muita henkilöitä, ketä? Kattaako ylläpitositoumus myös heidän kulunsa? Missä he majoittuvat? *Täytä muiden hakijoiden koko nimi ja syntymäaika.*

Kuka vastaa hakijan kuluista matkan aikana? Kuinka varat on hankittu? Kuinka suuri summa hakijan kuluihin on varattu? Vastaako hakija itse mistään kuluista? *Huom! Suomeen matkustavan henkilön osalta vaadittava rahasumma on vähintään 50 euroa/matkapäivä.*

Maksaako hakija itse matkat Suomeen?

Kyllä. Hakija toimittaa liitteeksi tiliotteensa, josta käy ilmi riittävät varat matkalippujen ostoon.

Ei. Kutsuja vastaa matkakuluista.



## YLLÄPITOSITOUKUS VIISUMIHAKEMUKSEN LIITTEEKSI

### Kutsujan suhde hakijaan:

Onko hakija sukua kutsujalle? Jos on, yksilöi sukulaisuussuhde. Hakemuksen liitteeksi tulee liittää selvitys sukulaisuudesta.

Kyllä, yksilöi suhteen laatu:

Ei, yksilöi kuinka hakija ja kutsuja tuntevat toisensa:

Ovatko kutsuja ja hakija tavanneet aiemmin? Jos ovat, missä ja milloin viimeksi?

Jos kutsuja ja hakija eivät ole sukua, kuinka tunnette toisenne? Kuinka kauan olette tunteneet?

Vakuutan allekirjoituksellani lomakkeessa ja liitteissä antamani tiedot oikeiksi. Vakuutan sitoutuvani viisumihakijan ylläpitoon ja/tai majoitukseen omasta tahdostani.

Tiedän, että väärän henkilötiedon ja väärän kirjallisen todistuksen antaminen viranomaisille on Suomessa rikoslain mukaan rangaistava teko ja että väärin tietojen antaminen voi johtaa viisumin myöntämättä jättämiseen tai myönnetyn viisumin kumoamiseen, maahanpääsyn epäämiseen ja Schengen-alueetta koskevan maahantuloikiellon määräämiseen.

Tiedostan, että tähän hakemuslomakkeeseen merkityt henkilötietoni toimitetaan jäsenvaltioiden toimivaltaisille viranomaisille viisumihakemusta koskevan päätöksen tekemiseksi ja maahantuloedellytysten varmistamiseksi.

Nämä tiedot syötetään ja tallennetaan viisumitietojärjestelmään (VIS) enintään viideksi vuodeksi, jonka aikana niitä voivat tutkia viisumiviranomaiset ja viranomaiset, joilla on toimivalta suorittaa viisumeja koskevia tarkastuksia ulkorajoilla ja jäsenvaltioiden alueella, ja jäsenvaltioiden maahanmuutto- ja turvapaikkaviranomaiset sen tarkistamiseksi, täyttyvätkö laillista maahantuloa, oleskelua ja jäsenvaltioiden alueella asumista koskevat edellytykset, ja niiden henkilöiden tunnistamiseksi, jotka eivät (enää) täytä näitä edellytyksiä, sekä turvapaikkahakemusten tutkimista ja niiden käsittelystä vastuussa olevan valtion määrittämistä varten. Tietyin edellytyksin tiedot ovat myös jäsenvaltioiden nimeämien viranomaisten ja Europolin käytettävissä terrorismirikosten ja muiden vakavien rikosten torjumiseksi, havaitsemiseksi ja tutkimiseksi.

Tietojen käsittelystä vastaavana jäsenvaltion viranomaisena ja rekisterinpitäjänä toimii Suomen ulkoministeriö. Lue henkilötietojen käsittelystäsi ja rekisteröidyn oikeuksistasi verkkosivuiltamme osoitteesta <https://um.fi/tietosuoja>

Olen tietoinen siitä, että minulla on oikeus missä tahansa jäsenvaltiossa saada ilmoitus siitä, mitä itseäni koskevia tietoja on tallennettu viisumitietojärjestelmään ja mikä jäsenvaltio tiedot on toimittanut, sekä vaatia, että minua koskevat virheelliset tiedot korjataan ja laittomasti käsitellyt tiedot poistetaan. Viisumihakemusta tutkiva viranomainen antaa minulle ohjeet siitä, miten voin käyttää oikeuttani tarkastaa itseäni koskevat henkilötiedot ja pyytää niiden oikaisemista



#### YLLÄPITOSITOUMUS VIISUMIHAKEMUKSEN LIITTEEKSI

tai poistamista, sekä tätä koskevista kyseisen jäsenvaltion kansalliseen lainsäädäntöön perustuvista muutoksenhakekeinoista.

Suomen tietosuojavaltuutetun toimisto (<https://tietosuoja.fi/>) käsittelee henkilötietojen suojaa koskevat vaateet.

Jos viisumin hakijalle myönnetään viisumi, ymmärrän, että hänen tulee poistua jäsenvaltioiden alueelta ennen viisumin voimassaolon päättymistä. Ymmärrän, että viisumin saaminen on vain yksi jäsenvaltioiden Euroopassa sijaitsevalle alueelle saapumisen edellytyksistä. Se, että henkilölle on myönnetty viisumi, ei tarkoita, että hän voi saada korvausta, jos hänen maahantulonsa estettäisiin sen vuoksi, että hän ei täytä asetuksen (EU) 2016/399 (Schengenin rajasäännöstö) 6 artiklan 1 kohdan edellytyksiä. Maahantulon edellytykset tarkistetaan uudelleen hakijan saapuessa jäsenvaltioiden Euroopassa sijaitsevalle alueelle.

Paikka	Päiväys
Kutsujan allekirjoitus	Kutsujan nimenselvennys

Allekirjoituksen oikeaksi todistaa:

Lomaketta ei huomioida viisumihakemuksen käsittelyssä, mikäli julkinen notaari ei ole todistanut allekirjoitusta oikeaksi. Lisätietoja allekirjoituksen oikeaksi todistamisesta Suomessa löydät osoitteesta <https://dvv.fi/allekirjoituksen-oikeaksi-todistaminen> . Ulkomailla allekirjoituksen voi todistaa oikeaksi edustuston päällikkö sekä hänen määräämänsä edustustossa palveleva henkilö.



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## YLLÄPITOSITOUKSEN VIISUMIHAKEMUKSEN LIITTEEKSI

### **Ylläpitositoumuksen liitteet:**

- kopio kutsujan henkilöllisyystodistuksesta
- kopio kutsujan oleskeluluvasta, mikäli kutsuja ei ole Suomen kansalainen
- kopio kutsujan työsopimuksesta
- kopio kutsujan viimeisen kolmen kuukauden palkkalaskelmista
- kopio kutsujan tiliotteesta viimeisen kolmen kuukauden ajalta
- kopio oikeudesta asunnon hallintaan (vuokrasopimus, kauppakirja, talonkirjaote tms.)
- selvitys sukulaisuussuhteesta, mikäli kutsuja ja hakija sukulaisia
- selvitys mahdollisista aiemmista tapaamisista (passileimat, matkaliput tms.)



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**Fyll i denna åtagandeförklaring om du vill bjuda in en släkting eller vän till Finland på besök i mindre än 90 dagar och vill stå för hens resekostnader och/eller logi under resan. Om den sökande kommer till Finland för mer än 90 dagar, ska hen ansöka om uppehållstillstånd. Information om ansökan om uppehållstillstånd finns på [www.migri.fi/sv](http://www.migri.fi/sv).**

**Bifoga nödvändiga bilagor till blanketten (se sista sidan) och be den visumsökande bifoga denna blankett jämte bilagor till visumansökan. Observera att notarius publicus ska styrka riktigheten av din underskrift. Blanketten kan inte beaktas vid beslutsprövningen utan en styrkt underskrift.**

**Åtagandeförklaringen garanterar inte att Schengenvisum utfärdas. I samband med inresan bedöms villkoren för inresan separat, varvid den sökande vid behov ska kunna uppvisa tillräckliga medel eller en åtagandeförklaring i samband med gränskontrollen.**

**Denna förklaring gäller**

- den visumsökandes uppehälle, dock inte logi.
- den visumsökandes logi, men inget annat uppehälle.
- både den visumsökandes logi och uppehälle.

**Uppgifter om inbjudaren om hen är en privatperson:**

Efternamn	Förnamn		
Adress		Stad	Postnummer
Telefonnummer	E-postadress		
Personbeteckning	Medborgarskap		
Uppehållstillståndets typ och giltighetstid om medborgarskapet är annat än Finland			
Förhållande till den visumsökande			

# ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



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## Uppgifter om inbjudaren om det är fråga om ett företag eller en sammanslutning:

Företagets/sammanslutningens namn		FO-nummer:	
Adress	Stad	Postnummer	
Kontaktpersonens namn		Kontaktpersonens telefonnummer	
Kontaktpersonens e-postadress			
Kontaktpersonens ställning i företaget/sammanslutningen			

## Uppgifter om den sökande

Efternamn	Förnamn		
Adress i det permanenta bosättningslandet			
Postnummer	Stad	Land	
E-postadress		Telefonnummer	
Passnummer, utfärdande stat		Beskickning där den sökande ansöker om visum	

## Uppgifter om inbjudarens bostad och arbetsplats. Ifylls om den sökande är en privatperson.

Boendeform <input type="checkbox"/> ägarbostad <input type="checkbox"/> hyresbostad <input type="checkbox"/> annan, vad?	
Boendekostnader/månad	Bostadens storlek och invånarantal

# ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



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Arbetsgivare	Yrke, uppgift
Löneinkomster före skatt per år	Löneinkomster efter skatt per år
Övriga inkomster, €/år efter skatt	Startdatum för anställningsförhållande
Anställningsförhållandets form <input type="checkbox"/> ordinarie <input type="checkbox"/> tidsbundet, till?	

## Uppgifter om resan

Planerad längd och tidpunkt för resan
Resans syfte och planerade program
Var bor den sökande under resan? Ange adressen till login.
Reser andra personer med den sökande, vilka? Täcker åtagandeförklaringen även deras kostnader? Var bor de under resan? <i>Fyll i de övriga sökandes fullständiga namn och födelsedatum.</i>
Vem står för den sökandes kostnader under resan? Hur har medlen förvärvats? Hur stort belopp har reserverats för den sökandes kostnader? Står den sökande själv för några kostnader? <i>Obs! Det belopp som krävs för en person som reser till Finland är minst 50 euro/resedag.</i>

## ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



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Betalar den sökande själv resorna till Finland?

Ja. Den sökande bifogar sitt kontoutdrag av vilket framgår tillräckliga medel för inköp av resebiljetter.

Nej. Inbjudaren står för resekostnaderna.

### Förhållande mellan inbjudaren och den sökande:

Är den sökande släkt med inbjudaren? Om ja, specificera släktförhållandet. Till ansökan ska bifogas en redogörelse för släktskap.

Ja, specificera förhållandets karaktär:

Nej, specificera hur den sökande och inbjudaren känner varandra:

Har inbjudaren och den sökande träffat tidigare? Om ja, var och när senast?

Om inbjudaren och den sökande inte är släkt med varandra, hur känner ni varandra? Hur länge har ni känt varandra?

Jag intygar med min underskrift att de uppgifter som jag angett i blanketten och bilagorna är riktiga. Jag försäkrar att jag av min egen vilja förbinder mig till den visumsökandes uppehälle och/eller logi.

Jag vet att lämnande av oriktiga personuppgifter och ingivande av osant intyg till myndigheterna i Finland är straffbart enligt strafflagen, och att lämnande av oriktiga uppgifter kan leda till att visumet inte utfärdas eller det utfärdade visumet återkallas, nekad inresa och meddelande av inreseförbud som gäller Schengenområdet.

Jag är medveten om att mina personuppgifter som jag angett på denna ansökningsblankett insänds till medlemsstaternas behöriga myndigheter för att fatta beslut om visumansökan och säkerställa villkoren för inresa.

Dessa uppgifter införs och sparas i visuminformationssystemet (VIS) för högst fem år. Under den tiden kan uppgifterna granskas av viseringsmyndigheter och myndigheter med befogenhet att utföra visumkontroller vid de yttre gränserna och på medlemsstaternas territorium och medlemsstaternas invandrings- och asylmyndigheter för att kontrollera om de villkor som gäller laglig inresa, vistelse och lagligt boende i medlemsstaterna uppfylls och för att identifiera de personer som inte (längre) uppfyller dessa villkor samt för att granska asylansökningar och fastställa den stat som ansvarar för deras behandling. Uppgifterna kan på vissa villkor användas även av de myndigheter som medlemsstaterna utsett och Europol för att bekämpa, upptäcka och undersöka terroristbrott och andra grova brott.

## ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



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Finlands utrikesministerium är personuppgiftsansvarig och den myndighet som medlemsstaten utsett för att ansvara för behandlingen av uppgifterna. Läs mer om hur vi behandlar dina personuppgifter och den registrerades rättigheter på vår webbplats på <https://um.fi/dataskydd>

Jag är medveten om att jag har rätt att i vilken medlemsstat som helst få besked om vilka uppgifter om mig har sparats i visuminformationssystemet och vilken medlemsstat som har skickat uppgifterna samt kräva att felaktiga uppgifter om mig rättas och uppgifter som olagligt behandlats raderas. Den myndighet som behandlar visumansökan ger mig anvisningar om hur jag kan utöva min rätt till att granska mina personuppgifter och begära att de rättas eller raderas samt om medel för ändringssökande som gäller detta och baserar sig på medlemsstatens nationella lagstiftning.

Dataombudsmannens byrå i Finland (<https://tietosuoja.fi/>) behandlar krav som gäller skydd av personuppgifter.

Om den visumsökande utfärdas visum, förstår jag att hen ska avlägsna sig från medlemsstaternas territorium före giltighetstiden för visumet går ut. Jag förstår att utfärdandet av visum är bara ett av de villkor som krävs för inresa till medlemsstaternas territorium i Europa. Det att personen utfärdats visum innebär inte att hen är berättigad till ersättning om hens inresa nekas på grund av att hen inte uppfyller villkoren i punkt 1 i artikel 6 i förordningen (EU) 2016/399 (kodex om Schengengränserna). Villkoren för inresa kontrolleras när den sökande anländer till medlemsstaternas territorium i Europa.

Ort	Datum
Inbjudarens underskrift	Inbjudarens namnförtydligande

Riktigheten av underskriften styrks av:

Blanketten beaktas inte vid behandlingen av visumansökan om notarius publicus inte har styrkt underskriften. Mer information om styrkande av underskrifter i Finland hittar du på <https://dvv.fi/sv/styrkande-av-underskrifter> . Utomlands kan underskriften styrkas av beskickningschefen samt av den person som hen utsett och som tjänstgör vid beskickningen.

## ÅTAGANDEFÖRKLARING SOM BIFOGAS TILL VISUMANSÖKAN



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### **Bilagor till åtagandeförklaringen:**

- kopia av inbjudarens identitetsbevis
- kopia av inbjudarens uppehållstillstånd om inbjudaren inte är finsk medborgare
- kopia av inbjudarens arbetsavtal
- kopia av inbjudarens lönekalkyler under de senaste tre månaderna
- kopia av inbjudarens kontoutdrag under de senaste tre månaderna
- kopia av besittningsrätt till bostaden (hyresavtal, köpebrev, boenderegisterutdrag osv.)
- redogörelse för släktskapsförhållandet om inbjudaren och den sökande är släkt
- redogörelse för eventuella tidigare möten (passtämplar, resebiljetter osv.)

**Annex 15**  
**Specimen of Bulgarian forms of declarations providing proof of  
sponsorship and /or private accommodation**

1.Покана-декларация за частно посещение на чужденец в Република България (Приложение №3 към чл.17, ал.2 от НУРИВОВР (това е най-често попълваната бланка-декларация);

2.Покана-декларация от физическо или юридическо лице, извършващо дейност по Търговския закон, за бизнес пътуване на чужденец в Република България (Приложение №4 към чл.17, ал.3 от НУРИВОВР;

3.Покана-декларация от юридическо лице, регистрирано по Закона за юридическите лица с нестопанска цел, за пътуване на чужденец в Република България (Приложение №5 към чл.17, ал.4 от НУРИВОВР;

4.Покана-декларация от представителство на чуждестранно юридическо лице, регистрирано по чл.24 от Закона за насърчаване на инвестициите, за бизнес пътуване на чужденец в Република България (Приложение №6 към чл.17, ал.5 от НУРИВОВР.

Област: .....

Рег. №: .....

Дата: .....

Звено „Миграция” – СДВР/ОДМВР: гр.....

Длъжностно лице: .....

Подпис:

<b>ПОКАНА-ДЕКЛАРАЦИЯ</b> за частно посещение на чужденец в Република България			
От името на: .....			
(имена по документ за самоличност)			
ЕГН: .....			
Гражданин на: .....			
Дата и място на раждане: .....			
(държава, област, община, населено място)			
Постоянен адрес: .....			
(област, община, населено място)			
Настоящ адрес: община, град/село .....			
бул./ул. .... № ... Бл. ... вх. ... ет. ... ап. ....			
Документ за самоличност	1	Лична карта или паспорт на гражданин на РБ	Домашен телефон: .....
	2	Паспорт	Серия ..... №.....
	3	Карта на продължително/постоянно пребиваващ чужденец	Изд. на ..... от ..... Валидна до .....
ДЕКЛАРИРАМ, че мога да осигуря жилище и средства за срок ..... дни за времето от ..... до ..... г. на чуждия гражданин:			
Имена по документ съгласно чл. 8, ал. 1 от Закона за чужденците в Република България: .....			
Гражданин на: .....			
Дата и място на раждане: .....			
(дата, държава, населено място)			
Местоживееене: .....			
(държава, населено място)			
адрес: .....			
с който съм/ несъм в родство .....			
(посочва се видът на родството)			
Чужденецът се придружава:			
1. Съпруг/а .....			
(имена по паспорт)			
Гражданин на: .....			
Дата и място на раждане: .....			
(дата, държава, населено място)			
Местоживееене: .....			
(държава, населено място)			
адрес: .....			
2. Деца до 18 г.: .....			
(име, дата на раждане, пол)			



Гостите ще приема в жилище на адрес: .....	
на което аз съм собственик/наемател. Жилището има ..... кв. м площ, състои се от ..... стаи и в момента в него живеят: аз, ..... (съпруг/а, деца и други)	
ИЗВЕСТНО МИ Е, че:	
1. В срок до 48 часа от датата на влизане в страната съм длъжен да регистрирам адресно на посочения по-горе адрес поканените от мен чужденци, като представя и настоящата декларация.	
2. Всички допълнително възникнали разходи на поканените от мен лица за пребиваване в Република България и завръщане в държавата, в която живеят (транспортни, лечебни, обезщетения за нанесени вреди и др.), ще бъдат за моя сметка съгласно чл. 45 ЗЧРБ.	
3. Компетентните служители от МВР и съответните длъжностни лица от местните администрации могат да извършват проверки за установяване верността на посочените от мен данни.	
4. Давам съгласието си съгласно чл. 4 ЗЗЛД данните, вписани в тази покана, както и документите, приложени към нея, да бъдат предоставени на компетентните органи на Република България и обработени във връзка с тази покана.	
5. За деклариране на неверни данни нося наказателна отговорност по чл. 313 от Наказателния кодекс.	
Дата: .....	Декларатор:
Гр./с.	саморъчен подпис
Началник на звено „Миграция“ – СДВР/ОДМВР: гр. ....  (населено място) или упълномощено от него длъжностно лице  (име, фамилия)	НОТАРИАЛНА ЗАВЕРКА:
УДОСТОВЕРЯВАМ, че посочените в декларацията данни относно местоживеенето на декларатора и жилищните му условия са верни.  Подпис:.....	
Печат	
Внесена такса по Тарифата 4 за МТ по ЗДТ	
квитанция № ...../.....  дата	
1. Поканата-декларация се попълва на машина. 2. След попълване на данните за придружаващите лица незапълнените полета се зачертават с наклонена линия. 3. Настоящият документ е личен и следва да се съхранява от лицето по време на гостуването му в Република България. Всяка поправка прави документа невалиден. Настоящият документ е личен и владеецът трябва да го пази в течение на своето пребиваване в Република България. Любая поправка делает документ недействительным. This is personal document and any person should keep it during his visit in the Republic of Bulgaria. Any correction will make the document invalid. C'est un document personnel et la personne est obligee de le garder lors de sa visite en Republique de Bulgarie. Chaque correction fait le document invalide. El presente documento es personal y tiene que ser guardado por el portador durante su visita en la Republica de Bulgaria. Cada correccion hace el documento invalido.	

Област: .....

Рег. №: .....

Дата: .....

Звено „Миграция” – СДВР/ОДМВР: гр.....

Длъжностно лице: .....

Подпис:

<b>ПОКАНА-ДЕКЛАРАЦИЯ</b> от физическо или юридическо лице, извършващо дейност по Търговския закон, за бизнес пътуване на чужденец в Република България			
<b>ДАНИ ЗА БЪЛГАРСКИЯ ТЪРГОВЕЦ</b>			
Вид и наименование на търговеца: .....			
ЕИК / БУЛСТАТ .....		(ЕТ, ЕООД, ООД, АД)	
Седалище: .....			
(област, община, населено място)			
Адрес: .....			
(населено място, улица, №, бл., вх., ап.)			
Телефон: .....	Факс: .....	Телекс: .....	
Представяван от: .....			
(имена по лична карта или паспорт, длъжност и ЕГН)			
(за чужденци) гражданство и ЕНЧ: .....			
ДЕКЛАРИРАМ, че мога да осигуря програмата, пребиваването и настаняването за срок ..... дни (до 90 дни) за времето ..... до ..... на изброените по-долу лица, с които съм в делови отношения.			
<b>ДАНИ ЗА ПОКАНЕНОТО ЛИЦЕ</b>			
Имена по документ за задгранично пътуване: .....			
Гражданин на: .....		Дата на раждане: .....	
Представител на: .....			
Вид и наименование на търговеца: .....			
(ЕТ, ЕООД, ООД, АД, КД)			
Седалище: .....			
(държава, район, щат, провинция и други)			
Адрес: .....			
(населено място, улица, №, бл., вх., ап.)			
Телефон: .....	факс: .....	телекс: .....	
Чужденецът се придружава от:			
Членове на семейството, секретар, шофьор, преводач и друг помощен персонал			
№	Имена по документ за задгранично пътуване	Гражданин на	Дата на раждане



Известно ми е, че:

1. В срок до 48 часа от датата на влизане в страната съм длъжен да регистрирам адресно поканените от мен чужденци, като представя и настоящата декларация, ако не са настанени в хотел.
2. Всички допълнително възникнали разходи на поканените от мен лица за пребиваване в Република България и завръщане в държавата, в която живеят, ще бъдат за моя сметка (включително транспортни, лечебни, обезщетения за нанесени вреди и др.).
3. За деклариране на неверни данни нося наказателна отговорност по чл. 313 от Наказателния кодекс.

Дата: .....

ДЕКЛАРАТОР: .....

(саморъчен подпис и имена на лицето, вписано в Търговския регистър)

**ЗАБЕЛЕЖКИ:** След попълване на списъка на придружаващите лица незапълнените полета се зачертават с една наклонена линия.

Настоящият документ се изготвя в три екземпляра.

Настоящият документ е личен и следва да се съхранява от лицето по време на гостуването му в Република България. Всяка поправка прави документа невалиден.

Настоящий документ является личным и владелец должен хранить его в течении своего пребывания в Республике Болгарии. Любая поправка делает документ недействительным.

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Област: .....

Рег. №: .....

Дата: .....

Звено „Миграция“ – СДВР/ОДМВР: гр.....

Длъжностно лице: .....

Подпис:

<b>ПОКАНА-ДЕКЛАРАЦИЯ</b> от юридическо лице, регистрирано по Закона за юридическите лица с нестопанска цел, за пътуване на чужденец в Република България			
<b>ДАННИ ЗА БЪЛГАРСКИЯ ТЪРГОВЕЦ</b>			
Вид и наименование на търговеца .....			
(ЕТ, ЕООД, ООД, АД)			
Седалище: .....			
(област, община, населено място)			
Адрес: .....			
(населено място, улица, №, бл., вх., ап.)			
Телефон: .....		Факс: .....	
Телекс: .....			
Представяван от: .....			
(имена по лична карта или паспорт, длъжност и ЕГН)			
(за чужденци) гражданство и ЕНЧ: .....			
ДЕКЛАРИРАМ, че мога да осигуря програмата, пребиваването и настаняването за срок ..... дни			
(до 90 дни) за времето ..... до ..... на изброените по-долу лица, с които съм в делови отношения.			
<b>ДАННИ ЗА ПОКАНЕНОТО ЛИЦЕ</b>			
Имена по документ за задгранично пътуване: .....			
Гражданин на: .....		Дата на раждане: .....	
Представител на: .....			
(Вид и наименование на търговеца - ЕТ, ЕООД, ООД, АД)			
Седалище: .....			
(държава, район, щат, провинция и други)			
Адрес: .....			
(населено място, улица, №, бл., вх., ап.)			
Телефон: .....		факс: .....	
телекс: .....			
Чужденецът се придружава от:			
Членове на семейството, секретар, шофьор, преводач и друг помощен персонал			
№	Имена по документ за задгранично пътуване	Гражданин на	Дата на раждане



Известно ми е, че:

1. В срок до 48 часа от датата на влизане в страната съм длъжен да регистрирам адресно поканените от мен чужденци, като представя и настоящата декларация, ако не са настанени в хотел.
2. Всички допълнително възникнали разходи на поканените от мен лица за пребиваване в Република България и завръщане в държавата, в която живеят, ще бъдат за моя сметка (включително транспортни, лечебни, обезщетения за нанесени вреди и др.).
3. За деклариране на неверни данни нося наказателна отговорност по чл. 313 от Наказателния кодекс.

Дата: .....

ДЕКЛАРАТОР: .....

(саморъчен подпис и имена на лицето, вписано в регистъра на юридическите лица на  
Министерството на правосъдието)

**ЗАБЕЛЕЖКИ:** След попълване на списъка на придружаващите лица незапълнените полета се зачертават с една наклонена линия.

Настоящият документ се изготвя в три екземпляра.

Настоящият документ е личен и следва да се съхранява от лицето по време на гостуването му в Република България. Всяка поправка прави документа невалиден.

Настоящият документ является личным и владелец должен хранить его в течении своего пребывания в Республике Болгарии. Любая поправка делает документ недействительным.

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---

Област: .....

Рег. №: .....

Дата: .....

Звено „Миграция” – СДВР/ОДМВР: гр.....

Длъжностно лице: .....

Подпис: .....

<b>ПОКАНА-ДЕКЛАРАЦИЯ</b>			
от представителство на чуждестранно юридическо лице, регистрирано по чл. 24 от Закона за насърчаване на инвестициите, за бизнес пътуване на чужденец в Република България			
<b>ДАНИИ ЗА ПРЕДСТАВИТЕЛСТВОТО</b>			
Наименование на представителството: .....			
Седалище: ..... (област, община, населено място)			
Адрес: ..... (населено място, улица, №, бл., вх., ап.)			
Телефон: .....		Факс: .....      Телекс: .....	
Представяван от: ..... ..... ЕГН ..... (имена по паспорт и длъжност)			
(за чужденци) гражданство: ..... ЕНЧ: .....			
ДЕКЛАРИРАМ, че мога да осигурия програмата, пребиваването и настаняването за срок ..... дни (до 90 дни) за времето ..... до ..... на изброените по-долу лица, с които съм в делови отношения.			
<b>ДАНИИ ЗА ПОКАНЕНОТО ЛИЦЕ</b>			
Имена по паспорт: .....			
Гражданин на: .....		Дата на раждане: .....	
Представител на: ..... (Вид и наименование на търговеца - ЕТ, ЕООД, ООД, АД )			
Седалище: ..... (държава, район, щат, провинция и други)			
Адрес: ..... (населено място, улица, №, бл., вх., ап.)			
Телефон: .....		факс: .....      телекс: .....	
Чужденецът се придружава от:			
Членове на семейството, секретар, шофьор, преводач и друг помощен персонал			
№	Имена по документ за задгранично пътуване	Гражданин на	Дата на раждане



Известно ми е, че:

1. В срок до 48 часа от датата на влизане в страната съм длъжен да регистрирам адресно поканените от мен чужденци, като представя и настоящата декларация, ако не са настанени в хотел.
2. Всички допълнително възникнали разходи на поканените от мен лица за пребиваване в Република България и завръщане в държавата, в която живеят, ще бъдат за моя сметка (включително транспортни, лечебни, обезщетения за нанесени вреди и др.).
3. За деклариране на неверни данни нося наказателна отговорност по чл. 313 от Наказателния кодекс.

Дата: .....

ДЕКЛАРАТОР: .....

(саморъчен подпис и имена на лицето, вписано в Регистъра на БТПП)

**ЗАБЕЛЕЖКИ:** След попълване на списъка на придружаващите лица незапълнените полета се зачертават с една наклонена линия.

Настоящият документ се изготвя в три екземпляра.

Настоящият документ е личен и следва да се съхранява от лицето по време на гостуването му в Република България. Всяка поправка прави документа невалиден.

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**Specimen of Romania's form of providing proof of  
sponsorship and/or private accommodation**

DECLARAȚIE PE PROPRIE RĂSPUNDERE  
FORMAL OBLIGATION

Nr. / No. RO

Subsemnatul I, the undersigned

Nume / Surname

Prenume / First name

Data și locul nașterii / Date and place of birth

Document de identitate<sup>(1)</sup> sau Permis de ședere<sup>(2)</sup> / Identity card<sup>(1)</sup> or Residence permit<sup>(2)</sup>

Adresa / Address

Ocupația / Profession

Scop / Purpose

- Vizită / Visit  
 Afaceri\* / Business  
 Turism\* / Tourism

Formațiunea teritorială  
pentru imigrări\*\*  
Immigration territorial unit\*\*

Îmi asum întreaga  
responsabilitate în fața  
Inspectoratului General pentru Imigrări  
privind cazarea străinului

I take full responsibility towards the  
General Inspectorate for Immigration  
for accommodating the foreign citizen

Nume / Surname

Prenume / First name

Cetățenia / Citizenship

Data și locul nașterii / Date and place of birth

Sex: / Sex: M, F

Nr. Pașaport / Passport no.  
Valabil până la / Valid until  
Adresa / Address



foto / photo

Legătura de familie cu solicitantul / Family relationship to applicant

Însoțit de soț/soție<sup>(3)</sup> / Accompanied by his or her spouse<sup>(3)</sup>

Însoțit de copii<sup>(3)</sup> / Accompanied by children<sup>(3)</sup>

Nr. zile / No. of days .....

Perioada / Period .....

De la / From ..... până la / until .....

VIZA VA FI SOLICITATĂ LA MISIUNEA DIPLOMATICĂ/OFCIUL CONSULAR DIN .....  
(THE VISA SHALL BE REQUESTED AT THE DIPLOMATIC MISSION/CONSULAR OFFICE FROM)

(1)  
Tip / type  
Număr / number

(2)  
Aplicabil numai în  
cazul străinilor,  
tipul de permis  
Applicable to foreigners  
only,  
type of permit

(3)  
Nume / surname  
Prenume / first name  
Data nașterii / date of birth  
Sex / Sex

și pentru suportarea cheltuielilor de întreținere  
și îndepărtare a străinului menționat mai sus în  
conformitate cu art. 38 alin. 1 și art. 144, alin. 2 din  
O.U.G. nr. 194/2002 republicată, cu modificările  
și completările ulterioare

and for bearing the living costs and the departure  
costs of the above mentioned foreign citizen  
according to para. 1 of art. 38 and para. 2 of art.  
144 of the G.E.O. no. 194/2002 republished, with  
subsequent amendments and additions

Obligația privește și tratamentul în caz de boală sau în cazul în care persoana invitată nu se mai poate întreține singură (ex.: vizite la doctori, medicamente, internări spitale) / The formal obligation also covers treatment in the event of illness or if the guest can no longer support herself/himself (e.g. visits to doctors, medication, hospitalization).

Obligația de a suporta costurile în caz de boală lasă neatinsă obligația străinului de a prezenta asigurare medicală la reprezentanța consulară a României în țara respectivă / The obligation to bear the costs in case of illness does not affect the foreigner's responsibility to present medical insurance to the Romanian consular representation in the country concerned.

Declarația de preluare a costurilor cuprinde și obligația de a suporta costurile care ar putea să intervină în cazul părăsirii teritoriului României de către străin (ex.: bilet de avion) conform art. 38 și art. 144, alin. (2) din O.U.G. nr. 194/2002 republicată, cu modificările și completările ulterioare, coroborat cu art. 14, alin. (4) din Regulamentul (CE) nr. 810/2009 al Parlamentului European și al Consiliului privind instituirea unui Cod comunitar de vize / The declaration of assumption of costs also includes the obligation to bear the costs that may arise if the foreigner leaves the territory of Romania (e.g. air ticket) according to art. 38 and art. 144, para. (2) of G.E.O. no. 194/2002 republished, with subsequent amendments and additions, in conjunction with art. 14, para. (4) of Regulation (EC) No. 810/2009 of the European Parliament and of the Council establishing a Community Code on Visas.

Am fost informat de către Inspectoratul General pentru Imigrări referitor la următoarele: / I have been informed by the General Inspectorate for Immigration of the following:

- limitele și durata responsabilității / the limits and duration of responsibility;
- necesitatea existenței unei asigurări medicale / the need for medical insurance;
- recuperarea cheltuielilor prin procedura executării, în cazul nerespectării obligațiilor / recovery of costs through the enforcement procedure in the event of non-compliance;
- culpabilitatea, de ex. în cazul falsului în declarații (art. 326 din Codul Penal – închisoare de la 6 luni la 2 ani sau amendă) / culpability, e.g. in the case of false statements (art. 326 of the Criminal Code - imprisonment from 6 months to 2 years or a fine);
- stocarea datelor mele personale conform Regulamentului (UE) 2016/679 al Parlamentului European și al Consiliului privind protecția persoanelor fizice în ceea ce privește prelucrarea datelor cu caracter personal și privind libera circulație a acestor date și O.U.G. nr. 194/2002 republicată, cu modificările și completările ulterioare / storage of my personal data in accordance with Regulation (EU) 2016/679 of the European Parliament and of the Council on the protection of individuals with regard to the processing of personal data and on the free movement of such data and G.E.O. 194/2002 republished, with subsequent amendments and additions.

Observații  
ale autorităților\*\*

Official  
remarks\*\*

Adresa unde este asigurată cazarea, dacă este diferită de cea a  
semnatarului acestei declarații /

Address of the lodging where accommodation will be provided, if different  
from the undersigned's normal address

Chiriaș / Tenant

Proprietar / Owner

Firmă / Organizație\*  
Company / Association\*

Da Nu

Îndeplinirea condițiilor de cazare\*\*  
Fulfillment of accommodation conditions\*\*

Asigurarea întreținerii\*\*  
Insurance of means of subsistence by the inviting party\*\*

Taxe\*\*

Taxes\*\*

Invitatorul / The inviter

Declar că datele și informațiile pe care le-am dat sunt corecte și complete și îmi asum obligația de mai sus. / The information and data provided are real and complete and I undertake the responsibility mentioned above.

**Certificarea identității invitatorului de către Inspectoratul General pentru Imigrări \*\* / Certification of the identity of the inviter by the General Inspectorate for Immigration \*\***

Invitatorul a semnat în fața mea. Această certificare este realizată pentru a fi prezentată în fața unei reprezentanțe diplomatice române / The inviting party signed in front of me. This certification is made in order to be presented before a Romanian diplomatic representation.

Localitatea / Place

Data / Date

Formațiunea teritorială / Teritorial unit

Data / Date

Nume funcționar / Name of the clerk  
(Semnătura) / (Signature)

Semnătura / Signature

Inspectoratul General pentru Imigrări / General Inspectorate for Immigration\*\*

Aprobată / Approved  
Respinsă / Rejected

Data aprobării/respingerii  
Date of approval/rejection

Semnătura/Ștampila / Signature/Stamp  
Șef serviciu/birou / Head of service/bureau

\*Pentru invitațiile în scop de turism și afaceri. În cazul firmelor se completează denumirea firmei, numărul de ordine în registrul comerțului și adresa. Pentru organizații se completează doar denumirea organizației. / In case of an invitation for tourism and business purposes. Companies shall fill the name, the order number in the trade register and the address. Organizations shall only fill the name.

\*\*Se completează de autorități. / To be filled by authorities.

Conform art. 38, alin.6, din O.U.G. nr. 194/2002 republicată, cu modificările și completările ulterioare, viza poate fi solicitată în termen de 30 de zile de la aprobarea invitației.

In accordance with para. 6 of art. 38, of G.E.O. 194/2002 republished, with subsequent amendments and additions the visa may be requested within 30 days from the date of approval of this invitation.