



Protocol number	Visa number
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VISA APPLICATION FORM

**IMPORTANT: FORMS THAT ARE INCOMPLETE AND/OR INCORRECTLY FILLED OUT WILL BE RETURNED.
 CAREFULLY READ AND FOLLOW INSTRUCTIONS BELOW.**

INSTRUCTIONS
<ul style="list-style-type: none"> • Write in block letters • Complete first and second page, except for box marked "For Official Use Only". • Answer all questions thoroughly and accurately. If a question does not apply, please write N/A. • Sign the form.

01 - Full name (First / Middle / Family Name)			Attach photo here - size: 40 mm x 35mm - (1 9/6 x 1 3/8 inches) - white background - front view, full face - must be recent picture
02 - Place of birth (city/state/country)	03 - Date of birth		
		Day Month Year _____	
04 - Country of citizenship	05 - Sex Male <input type="checkbox"/> Female <input type="checkbox"/>	06 - Marital status	
07 - Passport #	08 - Issuing country	09 - Expiration date	
		Day Month Year _____	

10 - Parents' full name

Father _____

Mother _____

11 - Job position

12 - Employer

13 - E-mail

14 - Business address	15 - Business telephone # (with area code)
16 - Home address	17 - Home telephone # (with area code) / Mobile

FOR OFFICIAL USE ONLY			
A - Consulta à SERE	B - Autorização da SERE	C - Tipo do Visto	
OF <input type="checkbox"/> TEL <input type="checkbox"/> No. _____	DESPTEL No. _____		
D - <input type="checkbox"/> Concessão	E - <input type="checkbox"/> Uma entrada	F - Validade	G - Data de emissão do visto
<input type="checkbox"/> Denegação	<input type="checkbox"/> Múltiplas entradas	_____ anos/dias	____/____/____

H - Observações	I - Data de apresentação do pedido ____/____/____	Assinaturas Funcionário _____ Chefia _____
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18 - PURPOSE OF TRIP

<input type="checkbox"/> TOURISM <input type="checkbox"/> BUSINESS <input type="checkbox"/> ATTEND SEMINAR OR CONFERENCE <input type="checkbox"/> VISIT AN EXHIBITION OR TRADE FAIR <input type="checkbox"/> RELIGIOUS MISSION <input type="checkbox"/> PARTICIPATE IN A SPORT OR ARTISTIC ACTIVITY <input type="checkbox"/> ATTEND SCHOOL	<input type="checkbox"/> OFFICIAL GOVERNMENT MISSION <input type="checkbox"/> TAKE PART IN SCIENTIFIC OR CULTURAL PROGRAM <input type="checkbox"/> RESEARCH ACTIVITIES <input type="checkbox"/> TRANSIT TO ANOTHER COUNTRY <input type="checkbox"/> WORK PERMIT <input type="checkbox"/> PERMANENT RESIDENCE VISA <input type="checkbox"/> OTHER
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19 - FULL DETAILS OF PURPOSE OF TRIP (MANDATORY):

20 - Place of arrival in Brazil	21 - Intended date of arrival	22 - Final destination in Brazil	23- Intended Length of Stay

24 - Contact Person in Brazil (name, institution and phone)

25 - Full address and phone number in Brazil where you will be staying

<p>26 - Have you ever been to Brazil?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>27 - If Yes for item 26, provide date, place and duration of last visit</p> <p>_____</p>
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28 - I DECLARE THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE

(to be signed by applicant himself)

Name

Signature