

VISA APPLICATION

(APPLICATION FOR UKRAINE ENTRY CLEARANCE)

Please, complete – print or write in printing letters – the form
 cross the boxes where applicable

Submit with this form:

- current passport
- two photographs
- the consular fee receipt

1. SURNAME (as written in your passport)

2. FULL NAME (as written in your passport)

3. OTHER NAMES OR SURNAMES USED IN THE PAST

4. DATE OF BIRTH

day	month	year
<input type="text"/>	<input type="text"/>	<input type="text"/>
country	town	
<input type="text"/>	<input type="text"/>	

5. SEX

female

male

6. NATIONALITY

present	former (if any)
<input type="text"/>	<input type="text"/>

7. PERSONAL NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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8. ADDRESS OF PERMANENT RESIDENCE

(country, postal code, town, street, building N°, apt N°).

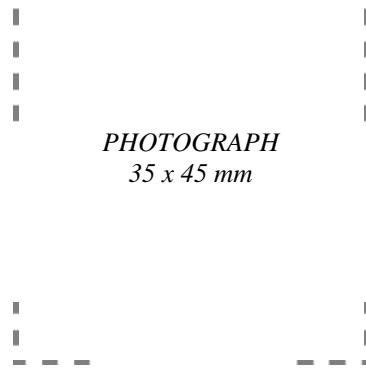
9. PASSPORT DETAILS

typ

number

date of issue	valid until
day month year	day month year
<input type="text"/>	<input type="text"/>

issuing authority



PHOTOGRAPH
35 x 45 mm

FOR OFFICE USE ONLY

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10. MARITAL STATUS

single		married		divorced		widowed	
yes <input type="checkbox"/>	no <input type="checkbox"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>

11. DID YOU SUFFER FROM ANY INFECTIOUS DISEASE DANGEROUS FOR PUBLIC HEALTH?

yes <input type="checkbox"/>	no <input type="checkbox"/>
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12. HAVE YOU EVER BEEN CHARGED OF ANY CRIMINAL OFFENCES ANYWHERE?

yes <input type="checkbox"/>	no <input type="checkbox"/>
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13. HAVE YOU EVER BEEN LIMITED OR PROHIBITED FROM AN ENTRY TO UKRAINE?

yes <input type="checkbox"/>	no <input type="checkbox"/>
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IF „YES“, PLEASE SPECIFY WHERE

14. HAVE YOU EVER BEEN DEPORTED OR REMOVED FROM UKRAINE?

yes <input type="checkbox"/>	no <input type="checkbox"/>
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15. PURPOSE OF YOUR JOURNEY?

16. DURATION OF STAY IN UKRAINE

number of days	months
<input type="text"/>	<input type="text"/>

17. DATE OF PROPOSED ENTRY TO UKRAINE

day	month	year
<input type="text"/>	<input type="text"/>	<input type="text"/>

18. POINT OF ENTRY TO UKRAINE

19. MEANS OF TRANSPORT FOR ENTRY TO UKRAINE

20. NAME AND ADDRESS OF ORGANIZATION WHICH INVITES

NAME AND ADDRESS OF PRIVATE PERSON WHO INVITES

21. CITIES IN UKRAINE YOU INTEND TO VISIT

22. ADDRESSES OF TEMPORARY RESIDENCE IN UKRAINE

23. IN CASE OF NEED WHO WILL GIVE YOU FINANCIAL SUPPORT

24. CHILDREN UNDER 16 YEARS INCLUDED ON YOUR PASSPORT AND WHO WILL TRAVEL WITH YOU TO UKRAINE

Surname	name	place of birth	date of birth			nationality
			day	month	year	

25. IF YOU HAVE BEEN TO UKRAINE, INDICATE THE DATE OF LAST VISIT

day	month	year
<input type="text"/>	<input type="text"/>	<input type="text"/>

26. VISA REQUESTED FOR:

single entry <input type="checkbox"/>	double entry <input type="checkbox"/>	multiple entry <input type="checkbox"/>
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THIS PART IS TO BE COMPLETED IN CASE OF TRANSIT THROUGH THE TERRITORY OF UKRAINE

27. COUNTRY OF DESTINATION

28. MEANS OF TRANSPORT TO THE POINT OF DEPARTURE FROM UKRANE

29. DO YOU HAVE AN ENTRY CLEARANCE FOR THE DESTINATION?

yes	<input type="checkbox"/>	no	<input type="checkbox"/>
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30. PLACE OF PROPOSED DEPARTURE FROM UKRAINE TO THE DESTINATION

30. DATE OF PROPOSED DEPARTURE FROM UKRAINE

day	month	year
<input type="text"/>	<input type="text"/>	<input type="text"/>

32. ADDITIONAL INFORMATION

I do hereby confirm that I have read and understand everything stated above. I declare that the information given by me in this application to the best of my knowledge is true. I am aware that untruthful data presented by my in this application may serve as a reason to refuse the issue of Ukraine's entry visa and to refuse me to enter Ukraine even in the case the entry visa has been issued. I also know that in the case I am refused to enter Ukraine I am not entitled for any refund or expenses incurred by me.

PLACE OF SUBMISSION

DATE OF SUBMISSION

day	month	year
<input type="text"/>	<input type="text"/>	<input type="text"/>

APPLICANT'S SIGNATURE