

Application for an entry visa to the Republic of Moldova

This application form is free.

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1	. Surname (Family name) (x)					For official use only.
2	. Surname at the birth (Former family r	name (c) (v)				Date of application:
_	. Surname at the ortal (Former laminy i	iunic (3) (X)				
3	. First name (s) (Given name (s)) (x)					Visa application number:
4	. Date of birth (day-month-year)	5. Place of	f birth	7. Cu	rrent nationality	Application lodged at
		6. Country	y of birth	Natio	nality at birth, if different:	☐ Embassy/consulate
						□ CAC
8	. Sex	9. Marital	status	ı		☐ Service provider
	Male Female	☐ Single	☐ Married ☐ Separa	ated Div	vorced	☐ Commercial
		☐ Widow	other (please spec	ify)		intermediary
10.	In the case of minors: Surname, first a authority/legal guardian	name, address (if	different from applicar	nt's) and nat	ionality of parental	☐ Border Name
	aumorty, togat gaat atai					☐ Other
11.	11. National identity number, where applicable					
12	Type of travel decomposite					File handled by:
12. Type of travel document:					Supporting documents:	
☐ ordinary passport ☐ Diplomatic passport ☐ Service passport ☐ Official passport ☐ Special passport ☐ Other travel document (please specify)					☐ Travel document	
13.					16. Issued by	☐ Means of subsistence
						☐ Invitation
17.	Applicant's home address	-	Telephone number (s)		E-mail address	☐ Means of transport
						□ тмі
18.	Residence in a country other than the	country of curren	nt nationality			Other:
	□ No					Visa decision:
	Yes. Residence permit or equivale	ent No	Val	lid until		_
19.	19. Current occupation					Refused
20.	Employer and employer's address and	d talanhona numb	er For students name	and address	of aducational	☐ Issued:
20.	establishment.	a telephone numb	cr. 1 or students, name	and address	of cucational	□ A
						□с
21. Main purpose (s) of the journey:				□ LTV		
☐ Tourism ☐ Business ☐ Visiting family or friends ☐ Cultural ☐ Sports			□ Valid:			
				from		
	☐ Medical reasons ☐ Study ☐ Transit ☐ Airport transit ☐ Other (please specified)				until	
		ı ∐ Otner (pleas	se specified)			Number of entries:
22.	Number of entries requested :		23. Duration of the intended stay or transit		□ 1 □ 2 □ Multiple	
	☐ Single entry ☐ Two entries Indicate number of days				Number of days	
	☐ Multiple entries					

24.	Visas issued for the Republi	ic of Moldova durin	g the na	st 12 months		
	☐ No ☐ Yes. Date(s) of validity from					
	Yes. Date(s) of validity	irom		to		
25.	Fingerprints collected previo	ously for the purpos	se of app	lying for a visa for the	Republic of Moldova	
	☐ No ☐ Yes					
					Date, if known	
26	Intended date of arrival on t	ha tarritary of tha		27 Intended date	of departure from the territory of the	
26.	Republic of Moldova	ne territory of the		Republic of M		
28.	28. Surname and first name of the inviting person(s) in the Republic of Moldova. If not applicable, name of hotel(s) or temporary accommodation(s) in the Republic of Moldova					
Addı	ress and e-mail address of inv	viting		Telephone and tele	fax	
perso	person(s)/hotel(s)/temporary accommodation(s)					
29.	Name and address of invitin	ng company/organiz	ation	Telephone and tele	fax of company/organization	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.g company organiz		Telephone and tele	and of company organization	
Surna	me, first name, address, telep	ohone, telefax and e	-mail ad	dress of contact person	n in company/organization	
30.	Cost of travelling and living	during the applican	nt's stay	is covered		
□ b	y the applicant himself/herse	lf	□ by	a sponsor (host comp	any, organization), please specify	
Mea	ns of support					
С	ash				referred to in field 28 or 29	
ПТ	raveler's cheques				other (please specify)	
	Credit cards Means of support					
□p	pre-paid accommodation					
-	Pre-paid transport					
	thers (please specify)			ll expenses covered du		
	aners (prease speerry)			re-paid transport	and stay	
				ther (please Specify)		
21	Parsonal data of the family	mambar which is ai			AVIO.	
51.	Personal data of the family	member winen is ci	uzen ol	are republic of words	γa	
Surn	ame			First name(s)		
					,	
Date	of birth	nationality			Number of travel document or ID card	
Fami	ly relationship with an citize	n of the Republic of	f Moldo	va		
□ s₁	oouse child		🗆	grandchild depend	ent ascendant	
32.	Place and date			-	signature of parental authority/legal	
	guardian)					
I am a	ware that the visa fee is not	refunded if the visa	is refuse	ed		
Applia	cable in case a multiple-entry	visa is applied for	(cf. field	1 no. 22)		
Applicable in case a multiple-entry visa is applied for (cf. field no. 22) I am aware of the need to have an adequate travel medical insurance for my first stay and subsequent visits to the Republic of Moldova.						

I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the visa application; and any personal data concerning me which appear on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Republic of Moldova and processed by those authorities, for the purposes of a decision on my visa application.

Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the SIA "Consul" System: 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 Republic of Moldova, immigration and asylum authorities in the Republic of Moldova for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Republic of Moldova are fulfilled, of identifying persons who do not or who no longer fulfill 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 Republic of Moldova for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. The authority of the Republic of Moldova responsible for processing the data is: the Ministry of the Interior Affairs of the Republic of Moldova.

I am aware that I have the right to obtain in the Republic of Moldova notification of the data relating to me recorded in the SIA "Consul" System 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. 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 Republic of Moldova. The national supervisory authority of the Republic of Moldova 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 will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of the Republic of Moldova which deals with the application.

I undertake to leave the territory of the Republic of Moldova before the expiry of the visa, if granted. I have been informed that possession of a visa is only one of the prerequisites for entry into the territory of the Republic of Moldova. The mere fact that a visa has been granted to me does not mean that I will be entitled to compensation if I fail to comply with the relevant provisions of legislations of the Republic of Moldova and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the territory of the Republic of Moldova.

Place and date	Signature (for minors, signature of parental authority/legal guardian)