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###### Application for National Visa

国别签证申请表

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This application form is free

此表格免费

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| 1. Surname (Family name) 姓氏 (x) | | | | | | | | OFFICIAL USE ONLY  签证机关专用 |
| 1. Surname at birth (Former family name(s)) 出生时姓氏: (x) | | | | | | | | Data złożenia wniosku |
| 1. First name(s) (Given name(s)) 名字: (x) | | | | | | | | Numer wniosku |
| 1. Date of birth (day-month-year)   出生日期(日-月-年): | | 1. Place of birth出生地点: 2. Country of birth出生国: | | | | 1. Current nationality: 现国籍:   Nationality at birth, if different出生时国籍，如不同: | | Wniosek złożono  □ w ambasadzie lub konsulacie  □ we wspólnym ośrodku przyjmowania wniosków  □ u usługodawcy  □ u pośredniczącego podmiotu komercyjnego  □ na granicy  Nazwa:  **□** inne |
| 1. Sex性别:   **□** Male男 **□** Female女 | 1. Marital status婚姻状况:   **□** Single单身 **□** Married已婚 **□** Separated分居 **□** Divorced离异  **□** Widow(er) 丧偶 **□** Other (please specify) 其他（请注明): | | | | | | |
| 1. In the case of minors: surname, first name, address (if different from applicant’s), telephone number, e-mail address and nationality of parental authority/legal guardian   父母（如是未成年申请人）/合法监护人（姓名、住址，如与申请人不同)电话号码、电子邮件及国籍: | | | | | | | | Wniosek przyjęty przez: |
| 1. National identity number, where applicable公民身份证号码，如适用: | | | | | | | | Dokumenty uzupełniające:  **□** dokument podróży  **□** środki utrzymania  **□** zaproszenie  **□** środek transportu  **□** podróżne ubezpieczenie medyczne  **□** inne:  Decyzja o wizie:  **□** odmowa wydania wizy  **□** wydanie wizy  **□** Termin ważności:  Od …………………………….  Do …………………………….  Liczba wjazdów:  □ 1 □ 2 □ wielokrotny  Liczba dni: |
| 1. Type of travel document旅行证件类型:   **□** Ordinary passport普通护照 **□** Diplomatic passport 外交护照 **□** Service passport公务护照  **□** Official passport因公护照 **□** Special passport特殊护照  **□** Other travel document (please specify) 其他旅行证件（请注明): | | | | | | | |
| 1. Series and number of travel document旅行证件号码: | | | 1. Date of issue   签发日期: | | 1. Valid until   有效期至: | | 1. Issued by   (indication of State)  签发机关: |
| 1. Applicant’s home address and e-mail address申请人家庭住址及电子邮件地址: | | | | | | Telephone number(s) 电话号码: | |
| 1. Residence in a country other than the country of current nationality在现国籍以外国家居住:   **□** No否  **□** Yes. 是Residence permit or equivalent ........................................ No ..............................Valid until  居留许可或同等证件 ............ numer 号码 ............. ważny do有效期至 ............................. | | | | | | | |
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| 1. Current occupation现职业: | | | | | | | |
| 1. Name, address and telephone number of the employer. In the case of students – the name and address of the school/educational establisment. In the case of students or doctoral students – the name and address of the headquarters of the institution conducting undergraduate studies, graduate studies or uniform master's studies or education at a doctoral school, and information about the field of study, and in the case of a doctoral school – information about scientific or artistic disciplines, as well as information about the semester or year.   雇主的姓名，地址和电话号码。对于学生，学校的名称和地址。对于学生或博士生-在进行第一阶段研究，第二阶段研究或统一硕士研究或博士学校教育的单位总部的名称和地址，以及有关研究领域的信息；如果是博士生学校，则提供科学或艺术学科的信息，以及有关学期或学年的信息。 | | | | | | | |
| Main purpose(s) of the journey旅行目的:□ Tourism旅游 □ Business 商务 □ Visiting family or friends 探亲访友 □ Cultural文化 □ Sports 体育 □ Official visit官方出访 □ Medical reason医疗 □ Study学习□ Other (please specify) ): 其他（请注明): | | | | | | | |  |
| 1. Member State(s) of destination申根目的地   ------------------POLAND波兰--------------------- | | | | 1. Member State of first entry首入申根成员国: | | | |  |
| 1. Number of entries requested申请入境次数:   **□** Single entry单次 **□** Two entries两次  **□** Multiple entries多次 | | | | 1. Duration of the intended stay of transit   Indicate number of days预计逗留或过境日数 | | | |  |

The fields marked with \* shall not be filled in by family members of EU, EEA or CH citizens (spouse, child or dependent ascendant) while exercising their right to free movement. Family members of EU, EEA or CH citizens shall present documents to prove this relationship and fill in fields No 34 and 35.

欧盟、欧洲经济区或瑞士公民的家庭成员(配偶、子女或赡养的老人)行使其自由往来的权利，不必回答带（\*）号的问题。欧盟、欧洲经济区或瑞士公民的家庭成员必须填写第35条及36条的问题并提交证明其亲属关系的文件。

(x) Fields 1-3 shall be filled in in accordance with the data in the travel document. 字段1-3 须依据旅行证件填上相关资料。

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| 1. Schengen or national visas issued during the past five years   过去五年获批的国别签证及申根签证  **□** No没有 **□** Yes有  Dates(s) of validity from 有效期自 ……………………………….. to至……………………………… | | | |  |
| 1. Fingerprints collected previously for the purpose of applying for a Schengen visa此前申请签证时是否有指纹记录:   **□** No否 **□** Yes 是  Date, if known: 日期，如知晓 : …………………………………………….. | | | |
| 1. Entry permit for the final country of destination, where applicable最后目的地国之入境许可   ------------------------------ NOT APPLICABLE不涉及------------------------------- | | | |  |
|  | | | |  |
| 1. Intended date of arrival to the Republic of Poland   预定进入波兰共和国日期: | | 1. Intended date of departure from the the Republic of Poland   预定离开波兰共和国日期: | |  |
| 1. Surname and first name of the inviting person(s) in the the Republic of Poland. If not applicable, name of hotel(s) or temporary accommodation(s) in the the Republic of Poland. 波兰共和国的邀请人姓名。如无邀请人，请填写波兰共和国的酒店或暂住居所名称。 | | | |  |
| Address and e-mail address of inviting person(s)/hotel(s)/temporary accommodation(s) 邀请人酒店暂住居所的地址及电字邮件: | | | Telephone and telefax电话号码: |  |
| 1. Name and address of inviting company/organisation   邀请公司或机构名称及地址: | | | Telephone and telefax of company/organisation  邀请公司/机构联系电话: |  |
| Surname, first name, business address, business phone number, telefax, and business e-mail address of contact person in company/organization邀请公司/机构联系人姓氏，名字，地址，电话号码及  电子邮件地址: | | | |  |
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| 1. Cost of travelling and living during the applicant’s stay is covered申请人旅费以及停留期间的生活费用由: | | | |  |
| □ by the applicant himself/herself  申请人自己承担  Means of support支付方式:  □ Cash现金  □ Traveller‘s cheques旅行支票  □ Credit card信用卡  □ Prepaid accommodation  预付住宿  □ Prepaid transport预付交通  □ Other (please specify)  其他(请注明): | **□** by a sponsor (host, company, organisation), please specify  由赞助人（邀请人，公司，机构）承担， 请注明:  **□** referred to in field 31 or 32参见第30及31项  **□** other (please specify) 其他（请注明）:  Means of support支付方式:  **□** Cash现金  **□** Accommodation provided预付住宿  **□** All expenses covered during the stay支付旅行期间全部费用  **□** Prepaid transport预付交通  **□** Other (please specify) 其他(请注明） | | |  |
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| 1. Information on the work permit, certificate of entry of the application on to the register of seasonal work applications, declaration of entrusting work to a foreign national or exemption from the obligation to possess a work permit. 关于工作许可证的信息、季节性工作申请登记簿中的申请进入证明、委托外国人工作或免除工作许可证义务的声明。 | | | |  |
| 1. Personal data of the family member who is an EU, EEA or CH citizen如有家庭成员为欧盟、欧洲经济区或瑞士联邦公民的，请填写该家庭成员的个人信息: | | | |  |
| Surname姓氏: | | | First name(s) 名字: |  |
| Date of birth  出生日期（日-月-年): | Nationality国籍: | | Number of travel document of ID card  旅行证件或个人身份证件号码: |  |
| 1. Family relationship with an EU, EEA or CH citizen   申请人与欧盟，欧洲经济区或瑞士联邦公民亲属关系，如涉及:  **□** spouse 配偶 **□** child子女 **□** grandchild孙子女 **□** dependent ascendant 赡养的老人 | | | |  |
|  | | | |  |
| 1. Place and date 地点及日期: | | 1. Signature (in the case of a minor, signature of the parents or legal guardians appointed by the court or other competent authority, or signature of one of the parents, if parental authority is vested only in that parent, or a legal guardian appointed by the court or other competent authority; for an unaccompanied minor – a legal guardian or other entity representing the minor appointed by a court or other competent authority; for a completely incapacitated person – a legal guardian appointed by a court or other competent authority).   签字（未成年人由法院或其他主管当局指定的父母或监护人签字，或由父母中的一方签字，如果父母权力仅由父母一方授予，或由法院或其他主管当局指定的监护人签字，对于无人陪伴的未成年人-法院或其他主管当局指定的代表未成年人的监护人或其他实体，对于完全丧失行为能力的人-由法院或其他主管当局指定的监护人） | |  |

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| I am aware that the visa fee is not refunded if the visa is refused. 本人知道即使签证被拒也不退还签证费。 |

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| Applicable in case a multiple entry national visa is applied for (cf. Field No 24): 适用于申请多次入境签证 (参照字段24):  I am aware of the need to have an adequate travel health insurance in the meaning of regulations on health care benefits financed out of public funds or travel health insurance for my first stay and any subsequent visits to the territory of the Republic of Poland. 本人知道须预备有足够保额的旅游医疗保险作为首次及其后各次到波兰共和国之用。 |

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| I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that lodging an application or providing documents containing false personal data or false information, as well as declaring untruth, concealing the truth, falsifying, counterfeiting, or forging a document in order to use it as authentic or using it as authentic in a national visa procedure will lead to refusing the national visa or annulling an issued national visa. I am also aware that under Polish law, such conduct amounts to an offence that can be punished by fine, restriction on liberty or imprisonment.  I undertake to leave the territory of the Republic of Poland at the latest on the last day of the period of my stay authorized by the national visa.  I am aware that possession of a national visa is only one of the conditions to enter the territory of the Republic of Poland. The mere fact that a national visa has been granted to me does not mean that I will be entitled to compensation if I fail to meet the entry conditions set forth in the Act on Foreigners and I am therefore refused entry into the territory of the Republic of Poland. The entry conditions will be verified again on arrival in the territory of the Republic of Poland.  I am aware that the issued national visa may be revoked if I no longer meet the conditions for issuing it.  When filing the application for a national visa for the purposes of undertaking or continuing full-time first or second cycle degree programme, uniform Master’s degree studies, or for the purposes of undertaking PhD studies, carrying out research or development work, undergoing an internship or joining the European Voluntary Service, if you failed to submit all documents necessary to verify the details included in the application and the grounds for filing the visa application, you have the right to submit them within seven days of filing the application.  本人知悉并同意以下条款：  本人确保以上信息均系本人如实提供，确保信息正确而完整。本人知悉提供虚假信息，伪造信息，不实信息，伪造证件，及在签证审理过  程中提供虚假、不实、伪造证词，隐瞒真实情况等，可导致本人签证申请被拒签，或已得到的签证被注销，或因此而对本人追究刑事责 任。  如本人的签证申请被批准，本人有义务在在签证到期前离开波兰共和国国境。  本人知悉得到签证仅是具备了进入波兰共和国国境的前提条件之一。如果本人因未满足关于外国人的相关法律而被拒绝入境，本人不得  要求赔偿。在进入波兰共和国的领土时，入境条件将被再次审核。  本人知悉，已颁发的国别签证如不满足其颁发条件，将被撤销。  为进行或继续全日制第一或第二周期学位课程、统一硕士学位研究，或从事博士学习、进行研究或开发工作、实习或加入欧洲志愿服务为 目的而提交国别签证申请时，若您未能提交所有用以核实申请中包含的细节和提交签证申请的理由的必要文件，您有权在提交申请后的七天之内提交这些文件。 | |
|  | |
| Place and date地点及日期: | Signature (in the case of a minor, signature of the parents or legal guardians appointed by the court or other competent authority, or signature of one of the parents, if parental authority is vested only in that parent, or a legal guardian appointed by the court or other competent authority; for an unaccompanied minor – a legal guardian or other entity representing the minor appointed by a court or other competent authority; for a completely incapacitated person – a legal guardian appointed by a court or other competent authority).  签字（未成年人由法院或其他主管当局指定的父母或监护人签字，或由父母中的一方签字，如果父母权力仅由父母一方授予，或由法院或其他主管当局指定的监护人签字，对于无人陪伴的未成年人-法院或其他主管当局指定的代表未成年人的监护人或其他实体，对于完全丧失行为能力的人-由法院或其他主管当局指定的监护人）. |

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In so far as the VIS is operational.