



Application for Schengen Visa

This application form is free



1690812010005766736

no attachment supplied

PHOTO

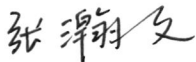
1. Surname (Family name) (x) ZHANG				WYŁĄCZNIE DO UŻYTKU SŁUŻBOWEGO	
2. Surname at birth (Former family name(s)) (x) ZHANG				Data złożenia wniosku:	
3. First name(s) (Given name(s)) (x) HAN WEN				Numer wniosku:	
4. Date of birth (year -month-day) 1989-09-23	5. Place of birth CHANGCHUN	7. Current nationality Nationality at birth, if different: CHINA		Wniosek złożono: <input type="checkbox"/> w ambasadzie lub konsulacie <input type="checkbox"/> we wspólnym ośrodku przyjmowania wniosków <input type="checkbox"/> u usługodawcy <input type="checkbox"/> u pośredniczącego podmiotu komercyjnego <input type="checkbox"/> na granicy	
6. Country of birth CHINA		7. Current nationality CHINA			
8. Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		9. Marital status <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other (please specify)		Nazwa: <input type="checkbox"/> inne	
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian				Wniosek przyjęty przez:	
11. National identity number, where applicable 220622198909230012				Dokumenty uzupełniające: <input type="checkbox"/> dokument podróży <input type="checkbox"/> środki utrzymania <input type="checkbox"/> zaproszenie <input type="checkbox"/> środek transportu <input type="checkbox"/> podróżne ubezpieczenie medyczne <input type="checkbox"/> inne:	
12. Type of travel document <input type="checkbox"/> Ordinary passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Official passport <input type="checkbox"/> Special passport <input checked="" type="checkbox"/> Other travel document (please specify) PASSPORT FOR PUBLIC AFFAIRS					
13. Number of travel document PE0397243	14. Date of issue 2014-08-13	15. Valid until 2019-08-13	16. Issued by MINISTRY OF FOREIGN AFFAIRS		
17. Applicant's home address and e-mail address CHINA, JILIN 130117 CHANGCHUN, NO 5222 JINGYUE STREET ZHANGHW@163.COM			Telephone number(s) 861 13180824777		
18. Residence in a country other than the country of current nationality <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Residence permit or equivalent No Valid until				Decyzja o wizie: <input type="checkbox"/> odmowa wydania wizej <input type="checkbox"/> wiza przyznana: <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> o ograniczonej ważności terytorialnej <input type="checkbox"/> Termin ważności: Od Do	
* 19. Current occupation Teacher					
* 20. Employer and employer's address and telephone number. For student, name and address of educational establishment. NORTHEAST NORMAL UNIVERSITY CHINA, JILIN, 130026 CHANGCHUN, NO 5268 RENMIN STREET 0431 85099336 86 431 86754312				Liczba wjazdów: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> wielokrotny	
21. Main purpose(s) of the journey: <input type="checkbox"/> Tourism <input checked="" type="checkbox"/> Business <input type="checkbox"/> Visiting family or friends <input type="checkbox"/> Cultural <input type="checkbox"/> Sports <input type="checkbox"/> Official visit <input type="checkbox"/> Medical reason <input type="checkbox"/> Study <input type="checkbox"/> Transit <input type="checkbox"/> Airport transit <input type="checkbox"/> Other (please specify)				Liczba dni:	

22. Member State(s) of destination POLAND	23. Member State of first entry POLAND
24. Number of entries requested <input checked="" type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries	25. Duration of the intended stay of transit Indicate number of days 6

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.

(x) Fields 1-3 shall be filled in in accordance with the data in the travel document.

26. Schengen visas issued during the past three years <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Dates(s) of validity from to	
27. Fingerprints collected previously for the purpose of applying for a Schengen visa <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date, if known	
28. Entry permit for the final country of destination, where applicable Issued by Valid from until	
29. Intended date of arrival in the Schengen area 2014-12-10	30. Intended date of departure from the Schengen area 2014-12-15
* 31. Surname and first name of the inviting person(s) in the Member State(s). If not applicable, name of hotel(s) or temporary accommodation(s) in the Member State(s) KIELAN PIOTR	
Address and e-mail address of inviting person(s)/hotel(s)/temporary accommodation(s) RECTOR@ASP.WROC.PLA <small>POLAND,004871 WROCLAW, EUGENIUSZ GEPPERT ACADEMY OF FINE ART AND DESIGN 4534/36</small>	
Telephone and telefax 0713438097 0713437654	
* 32. Name and address of inviting company/organisation	Telephone and telefax of company/organisation
Surname, first name, address, telephone, telefax, and e-mail address of contact person in company/organisation	
* 33. Cost of travelling and living during the applicant's stay is covered	
<input checked="" type="checkbox"/> by the applicant himself/herself Means of support <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Prepaid accommodation <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify)	<input type="checkbox"/> by a sponsor (host, company, organisation), please specify <input type="checkbox"/> referred to in field 31 or 32 <input type="checkbox"/> other (please specify) Means of support <input type="checkbox"/> Cash <input type="checkbox"/> Accommodation provided <input type="checkbox"/> All expenses covered during the stay <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify)

34. Personal data of the family member who is an EU, EEA or CH citizen		
Surname		First name(s)
Date of birth	Nationality	Number of travel document of ID card
35. Family relationship with an EU, EEA or CH citizen <input type="checkbox"/> spouse <input type="checkbox"/> child <input type="checkbox"/> grandchild <input type="checkbox"/> dependent ascendant		
36. Place and date CHANGCHUN 2014-11-10		37. Signature (for minors, signature of parental authority/legal guardian)  ZHANG HANWEN

I am aware that the visa fee is not refunded if the visa is refused.

Applicable in case a multiple-entry visa is applied for (cf. Field No 24):

I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States.

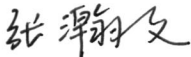
I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the visa application; and any personal data concerning me which appear on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States 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 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 for the purposes of verifying whether the condition 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. The authority of the Member State responsible for processing the data is: Centralny Organ Techniczny KSI, Komenda Główna Policji, Puławska 148/150, 02-624 Warszawa.

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. 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 will hear claims concerning the protection of personal data: Generalny Inspektor Ochrony Danych Osobowych, ul. Stawki 2, 00-193 Warszawa.

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 any may also render me liable to prosecution under the law of the Member State which deals with the application.

I undertake to leave the territory of the Member States 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 European territory of the Member States. 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 Article 5(1) of Regulation (EC) No 562/2006 (Schengen Borders Code) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Member States.

Place and date CHANGCHUN 2014-11-10	Signature (for minors, signature of parental authority/legal guardian):  ZHANG HANWEN
---	--

¹ In so far as the VIS is operational.



1690812010005766736

no attachment supplied

Date of appointment	2014-12-01 time: 10:00
Service passport	WIZA_WS
Location	Beijing
Mission	Embassy of the Republic of Poland in Beijing 1, Ritan Lu, Jianguomenwai 1, Ritan Lu, Jianguomenwai Phone (86 10) 65321235 ext. 108, 102, Fax (86 10) 65323567

