

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

country

town

5. SEX

female

male

6. NATIONALITY

present

former (if any)

7. PERSONAL NUMBER

8. ADDRESS OF PERMANENT RESIDENCE (country, postal code, town, street, building №, apt №).

9. PASSPORT DETAILS

type

number

date of issue

day

month

year

valid until

day

month

year

issuing authority

PHOTOGRAPH
35 x 45 mm

FOR OFFICE USE ONLY

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10. MARITAL STATUS

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

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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?

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16. DURATION OF STAY IN UKRAINE

number of days months

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17. DATE OF PROPOSED ENTRY TO UKRAINE

day month year

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18. POINT OF ENTRY TO UKRAINE

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19. MEANS OF TRANSPORT FOR ENTRY TO UKRAINE

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20. NAME AND ADDRESS OF ORGANIZATION WHICH INVITES

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NAME AND ADDRESS OF PRIVATE PERSON WHO INVITES

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21. CITIES IN UKRAINE YOU INTEND TO VISIT.

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22. ADDRESS OF TEMPORARY RESIDENCE IN UKRAINE

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

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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

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 UKRAINE

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

yes

no

30. PLACE OF PROPOSED DEPARTURE FROM UKRAINE TO THE DESTINATION

31. DATE OF PROPOSED DEPARTURE FROM UKRAINE

day

month

year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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32. ADDITIONAL INFORMATION

I do hereby confirm that I have read and understood 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 me 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 of expenses incurred by me.

PLACE OF SUBMISSION

DATE OF SUBMISSION

day

month

year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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APPLICANT'S SIGNATURE