

Required Documents Checklist

ALL TRAVELERS must include the following documents in your package to G3:

- Your original valid signed passport. It must have two blank visa pages facing each other and more than six months before expiry.
- Non-US citizens must provide a notarized copy of their Alien Registration Card (A.R.C.) or U.S. Visa and original I-94.
- One completed, signed visa application form (attached).
- Two passport-style (2"x2") photographs taken within the last 6 months, on photo paper and with a plain white background.
- Original airline ticket, or confirmation of ticket purchase showing ticket number.
- Copy of hotel reservations.
- Proof of international health insurance with a minimum coverage of \$50,000.

BUSINESS TRAVELERS must also include:

- Completed, signed supplemental application for business applicants "Questionnaire for Visa Applicants - Appendix A" (attached).
- A business letter from their U.S. company. This letter must explain the purpose of the trip and provide a financial guarantee. It must be on letterhead and signed by a representative of the company other than the applicant. A sample is attached.
- A letter of invitation from the organization to be visited in Sweden; a sample is attached.

TOURIST TRAVELERS must also include:

- Completed and signed supplemental application for tourists "Family Appendix for Applicants - Appendix D" (attached).
- Recent original bank statement. Account numbers may be blacked out to protect your privacy; do not obscure other information.
- A letter from your employer listing your position and stating that you will return to work after your trip.

NOTES:

Schengen visas are issued by, and are valid for, the following countries: Austria, Belgium, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Lithuania, Luxembourg, Malta, The Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden and Switzerland. You must apply at the consulate of your main destination.

*For multiple entry visas valid for longer than one month, both the business letters from the US and Swedish companies must specifically request the required visa length.

Send all required documents and the completed Traveler Information form to G3 using a service with tracking such as FedEx or UPS.

Applicable Fees

Embassy Fees for Visa Processing

Visa Type	5 Business Days	8 Business Days	12 Business Days
Single Entry	\$100.00	\$90.00	\$85.00
Multiple Entry, valid 1 month	\$120.00	\$100.00	\$85.00
Multiple Entry, valid 6 months*	\$120.00	\$100.00	\$85.00

G3 Processing Fees

Visa Type	5 Business Days	8 Business Days	12 Business Days
Tourist	\$90.00	\$80.00	\$60.00
Business	\$95.00	\$85.00	\$60.00
Transit	\$90.00	\$80.00	\$60.00



Concierge Level Service Requested
An additional service fee of \$75 per visa will apply.

Visa Order Form GK 989B

Traveler Information

1. Traveler Name _____
 Date of Birth _____

2. Traveler Name _____
 Date of Birth _____

Travel Details

Date of US Departure: _____
 I must have my passport no later than: _____

Other visas or passport services requested:

Shipping and Contact Information

This must be a physical address for FedEx delivery; no P.O. Boxes.

Contact Name: _____
 Company Name: _____
 Street Address: _____
 Apt. /Suite: _____
 City: _____
 State: _____ Zip Code: _____
 Home Phone: _____
 Office Phone: _____
 Mobile Phone: _____
 Contact Email: _____
Please provide an email address so we may send you shipping and status updates.

Return Shipping

Passports will be returned via Federal Express.

Select One:

- 3 Business Day Delivery \$16.00
- Standard Overnight Delivery \$25.00
- 8 AM Delivery** \$80.00
- Saturday Delivery** \$40.00
- Same Day Delivery** Please Call
- International Delivery** Please Call

***These services may not be available for all delivery locations.*

Concierge Level Service

Check here to select Concierge Level Service

G3's exclusive Concierge Level Service includes:

- Dedicated Concierge Level Staff handling your visa request.
- Document review via email before you send in your request.
- Creation of online visa applications (as applicable).
- Personal telephone call confirming package receipt in G3's office.
- Personal telephone calls confirming visa completion and delivery details.
- Tracking of return delivery and follow-up to ensure satisfaction.
- Creation of FedEx airbills for inbound packages to G3 (shipping fees apply).
- Upgrade of FedEx return delivery from Standard to Priority Overnight.
- Emergency Concierge Services and Lost Passport Support.
- Dedicated Concierge email and emergency page number.

An additional fee of \$75.00 per visa will apply to Concierge Level Service requests. Please see the "About G3 Visas" page on www.g3visas.com for a description of G3's standard service offering.

Send This Form and All Required Documents To:

G3 New York: 212.433.1356 Phone
 888.448.4727 Toll Free
 646.666.7670 Fax
NYC@g3visas.com

Attn: Visa Department
 60 East 42nd Street
 4th Floor, Suite 457
 New York, NY 10165

www.g3visas.com

G3 Visas & Passports, Inc. acts on the behalf of the client, and cannot be held liable for the services rendered by U.S. Government agencies, Post Offices, Travel Agents or other entities in connection with visa/passport processing. G3 disclaims any liability for delays or loss of passports as may occur through above services or by any delivery service. Damage compensation is not available.

Payment Information

Please see the attached visa requirements sheet for applicable embassy and G3 processing fees.

Select Payment Type:

- Credit Card
- Check (company or certified)
- Approved Billing Terms

Billing, P.O., Project or Reference Code # _____

Total Fees from Visa Requirement Sheet:

	Fee	x # of Travelers	Total
Embassy Fee	_____	x _____	= _____
G3 Processing Fee	_____	x _____	= _____
Concierge Level Service (Optional)	_____	x _____	= _____
Shipping Fee	_____		= _____
		Subtotal:	_____
		Add 5% fee for credit card processing:	_____
		Total Payment Enclosed:	_____

For Payment Via Credit Card:

American Express, Discover, MasterCard and Visa only

Name as it appears on card: _____
 Account Number: _____
 Expiration Date: _____ Billing Zip Code: _____
 Security Code: _____
(Discover, MasterCard or Visa: 3 digit code on back of card; American Express: 4 digit code on front of card.)

Cardholder Signature: _____

Sample Business Letter from U.S. Company

*****Please print your business letter on company stationery*****

June 1, 2011

Consulate General of (*Country you are traveling to*)

Consular Section

Dear Visa Officer,

Jeremy Simmons (*Insert your name*), Vice President (*Insert your position*), International Public Policy, East Coast Promotions, Inc. (*Insert the name of your company*) is planning a business trip to (*Country you are traveling to*) on Monday, August 3 through August 17 (*Dates of your trip*). During this trip he has scheduled meetings to discuss the sale and distribution of our products.

His agenda is to meet and discuss business with Mr. Hank Hartford (*Insert Name of Contact*) at:

Overseas Company Name
Street Address
City, Country Zip code
Telephone number

(It is important to indicate which company and individual you are going to visit.)

East Coast Promotions, Inc. (*Insert Company Name*) will assume all financial responsibility for any debts incurred by Jeremy Simmons while traveling on business in (*Country you are traveling to*).

He requests that you issue a (*insert type and duration of visa*) visa. I appreciate your attention to this matter.

Sincerely,

Barry G. Hart (*Please have someone other than the applicant sign this letter.*)
Senior Vice President
East Coast Promotions, Inc.

Sample Business Invitation Letter from Overseas Company

*****Please print your business letter on company stationery*****

June 1, 2011

Consulate General of (*Country you are traveling to*)

Consular Section

Dear Visa Officer,

We are cordially inviting Jeremy Simmons (*Insert your name*), Vice President (*Insert your position*), International Public Policy, East Coast Promotions, Inc. (*Insert the name of your company*) to visit (*Country you are traveling to*) on Monday, August 3 through August 17 (*Dates of your trip*). During this trip he will meet with our company to discuss the sale and distribution of our products.

His agenda is to meet and discuss business with Mr. Hank Hartford (*Insert Name of Contact*) at:

Company Name

Street Address

City, Country Zip code

Telephone number

(It is important to indicate which company and individual you are going to visit.)

East Coast Promotions, Inc. (*Insert Company Name*) will assume all financial responsibility for any debts incurred by Jeremy Simmons while traveling on business in (*Country you are traveling to*).

We request that you issue a (*insert type and duration of visa*) visa. I appreciate your attention to this matter.

Sincerely,

John P. Smith

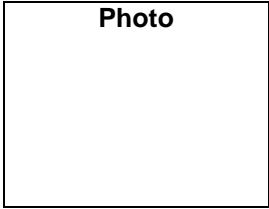
Executive Officer

Overseas Company, Inc.



Application for Schengen Visa

This application form is free



1. Surname (Family name) (x)				For official use only Date of application: Visa application number: Application lodged at <input type="checkbox"/> Embassy/consulate <input type="checkbox"/> CAC <input type="checkbox"/> Service provider <input type="checkbox"/> Commercial intermediary <input type="checkbox"/> Border			
2. Surname at birth (Former family name(s)) (x)							
3. First name(s) (Given name(s)) (x)							
4. Date of birth (day-month-year)		5. Place of birth		7. Current nationality		Name: <input type="checkbox"/> Other:	
		6. Country of birth		Nationality at birth, if different			
8. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		9. Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other (please specify)				File handled by: Supporting documents: <input type="checkbox"/> Travel document <input type="checkbox"/> Means of subsistence <input type="checkbox"/> Invitation <input type="checkbox"/> Means of transport <input type="checkbox"/> TMI <input type="checkbox"/> Other:	
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian							
11. National identity number, where applicable						Visa decision <input type="checkbox"/> Refused <input type="checkbox"/> Issued: <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> LTV <input type="checkbox"/> Valid From..... Until	
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"/> <input type="checkbox"/> Other (please specify)							
13. Number of travel document		14. Date of issue		15. Valid until		16. Issued by	
17. Applicant's home address and e-mail address				Telephone number(s)			
18. Residence in a country other than that country of current nationality <input type="checkbox"/> No <input type="checkbox"/> Yes. Resident permit or equivalent No Valid until						Number of entries <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple Number of days:	
* 19. Current occupation							
* 20. Employer and employer's address and telephone number. For students, name and address of educational establishment.						From..... Until	
21. Main purpose(s) of the journey <input type="checkbox"/> Tourism <input 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 reasons <input type="checkbox"/> Study <input type="checkbox"/> Transit <input type="checkbox"/> Airport transit <input type="checkbox"/> Other (please specify)							
22. Member State(s) of destination			23. Member state of first entry			Number of days:	
24. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries			25. Duration of the intended stay or transit Indicate number of days				
26. Schengen visas issued during the past three years <input type="checkbox"/> No <input type="checkbox"/> Yes. Date(s) of validity from to.....							
27. Fingerprints collected previously for the purpose of applying for a Schengen Visa <input type="checkbox"/> No <input type="checkbox"/> Yes. Date if known.....							

The field marked with * shall not be filled in by family members of EU,EEA or CH citizens (spous, 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 accordance with the data in travel document.

28. Entry permit for the final country of destination, where applicable Issued by Valid from Until.....		For official use only	
29. Intended date of arrival in the Schengen Area	30. Intended date of departure from the Schengen Area		
* 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)			
Address and e-mail address of inviting person(s)/hotel(s) temporary accommodation(s)	Telephone and telefax		
* 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 traveling and living during the applicant's stay is covered <input type="checkbox"/> by the applicant himself/herself <input type="checkbox"/> by the 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"/> Traveler's cheques <input type="checkbox"/> Credit card <input type="checkbox"/> Prepaid accommodation <input type="checkbox"/> Prepaid transport <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 or 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	37. Signature (for minors, signature of parental authority/legal guardian)		

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 State.

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 purpose of verifying whether the conditions 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 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 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: The Swedish Migration Board, 601 70 Norrköping, Sweden, www.migrationsverket.se.

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 the 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 national law of the State concerned. The national supervisory authority of that Member State (The Swedish Data Inspection Board, Box 8114, 104 20 Stockholm, Sweden, www.datainspektionen.se) 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 Member State which deals with the application.

I undertake to leave the territory of the Member State 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 European territory of the Member States.

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

⁽¹⁾ In so far the VIS is operational.

Questionnaire for visa applicants – Appendix A

- Business
 Conference visit

1 Personal particulars

Surname	Date of birth (yr, mth, day)
Given names (in full)	

2 Your stay in Sweden

A. Who took the initiative for your visit to Sweden?

B. Where do you plan to live during your stay in Sweden?

C. Who is paying for your travel to Sweden and for your upkeep during your stay here?

--

3 If the application is for a business trip

A. Which company/organization do you represent?

--

B. What position do you hold in the company/organization?

--

C. What is the company's principal field of activity?

--



2 1 0 0 2 2

D. How big is the company? (Turnover, annual profit, number of employees, etc)

E. Is the company part of an international group?

<input type="checkbox"/> No	<input type="checkbox"/> Yes. If yes, state the name of the group:
-----------------------------	--

F. Has your company previously had any contact with the Swedish company you plan to visit?

<input type="checkbox"/> No	<input type="checkbox"/> Yes. If yes, state when:
-----------------------------	---

G. Has a representative of your company visited Sweden previously?

<input type="checkbox"/> No	<input type="checkbox"/> Yes. If yes, state who and when:
-----------------------------	---

H. How important is your visit and what do you expect to get out of it?

 **4 If the visit is to attend a conference**

A. State which conference or other event you intend to take part in

B. In what capacity are you taking part in the conference/event?

--

 **5 Signature**

I swear that the information I have given is correct and complete.

Place and date	Signature (for minors etc, signature of custodian/guardian)

 **Regarding documents to be enclosed with the visa application, please consult the information brochure 'Applying for a Swedish Entry Visa'**



Questionnaire for visa applicants – Appendix A

Business
 Conference visit

1 Personal particulars

Surname	Date of birth (yr, mth, day)
Given names (in full)	

2 Your stay in Sweden

A. Who took the initiative for your visit to Sweden?

B. Where do you plan to live during your stay in Sweden?

C. Who is paying for your travel to Sweden and for your upkeep during your stay here?

3 If the application is for a business trip

A. Which company/organization do you represent?

B. What position do you hold in the company/organization?

C. What is the company's principal field of activity?

Instructions on how to fill in this form

Så fyller du i den här blanketten

Put a cross in the box if you plan to travel to Sweden on business or for a conference.
Kryssa i om du ska resa till Sverige för ett affärs/företagsbesök eller en konferens.

Enter your full name and date of birth. They must correspond with the particulars in your passport.
Fyll i ditt fullständiga namn och din födelsedag. Uppgifterna ska stämma överens med ditt pass.

State whether you yourself have taken the initiative for the visit to Sweden, or whether someone else has invited you (A). Enter the address at which you will be staying in Sweden. If you will be staying with someone, enter his/her name and address (B). Also, state who is paying for your journey and your expenses in Sweden (C).

Här vill vi veta om du själv tagit initiativet till besöket i Sverige, eller om någon annan har bjudit in dig (A). Skriv också vilken adress du kommer att ha i Sverige. Om du ska bo hos någon, skriv då den personens namn och adress (B). Du ska också skriva vem som betalar din resa och dina kostnader i Sverige (C).

- Enter the name of the company you represent/are employed by (A). Describe your position or line of work within the company (B) and the company's main field of operations (C).
- State the company's annual turnover and number of employees (D).
- If the company is part of an international group, put a cross in the 'Yes' box and state the name of the group (E).
- If your company has previously been in contact with the company in Sweden, put a cross in the 'Yes' box and state when (F).
- If someone from your company has previously been in Sweden on business, put a cross in the 'Yes' box and state the person's name and when he/she visited Sweden (G).
- You are also required to state how important your visit to Sweden is for the company and what you expect to get out of it (H).

Om ansökan gäller affärs/företagsbesök:

Fyll i vilken företag du representerar/är anställd hos (A). Du ska också skriva vilken tjänst eller uppgift du har inom företaget (B) samt företagets huvudsaliga verksamhet (C).

Fyll i företagets årliga omsättning och antal anställda (D).

Om företaget ingår i en internationell grupp, kryssa i "Yes" och skriv namnet på gruppen (E).

Om företaget tidigare haft kontakter med företaget i Sverige, kryssa i "Yes" och skriv när (F).

Om någon från ditt företag har besökt Sverige i affärer, kryssa i "Yes" och skriv den personens namn samt när han eller hon besökte Sverige (G).

Du ska också skriva hur viktigt ditt besök i Sverige är för företaget och vad du förväntar dig att få ut av det (H)



2 1 0 0 2 2

D. How big is the company? (Turnover, annual profit, number of employees, etc)

E. Is the company part of an international group?

No Yes. If yes, state the name of the group:

F. Has your company previously had any contact with the Swedish company you plan to visit?

No Yes. If yes, state when:

G. Has a representative of your company visited Sweden previously?

No Yes. If yes, state who and when:

H. How important is your visit and what do you expect to get out of it?

4 If the visit is to attend a conference

A. State which conference or other event you intend to take part in

B. In what capacity are you taking part in the conference/event?

5 Signature

I swear that the information I have given is correct and complete.

Place and date

Signature (for minors etc, signature of custodian/guardian)

Regarding the documents to be enclosed with the visa application, please consult the fact sheet "Facts about entry visas" or the web site www.migrationsverket.se

State here which conference or event you plan to take part in (A) and also in what capacity you will be attending (B).

Om besöket avser deltagande i konferens ska du fylla i vilken konferens eller evenemang du ska delta i (A) och även i vilken egenskap du ska delta (B).

Don't forget to sign your application!

Glöm inte att skriva under frågeformuläret

Remember to enclose

For a business visit

- A copy of your passport
- Two passport photos that are no more than six months old and that are taken full-face (taken when you are facing the camera directly with your eyes looking straight at the camera).
- An invitation (in Swedish or English) from the Swedish company
- A document from your company certifying that you will be visiting the Swedish company concerned.

OBS! Kom ihåg att bifoga

Vid affärsbesök

- *Kopia av ditt pass*
- *Två fotografier i passformat som är tagna rakt framifrån och inte är äldre än sex månader.*
- *Inbjudan (på svenska eller engelska) från det svenska företaget*
- *Intyg från din arbetsgivare som bekräftar att du ska besöka det svenska företaget*
- *Kopia av det svenska företagets registreringsbevis*

- A copy of the Swedish company's certificate of incorporation (registreringsbevis).

For a conference visit:

- A copy of your passport
- Two passport photos that are no more than six months old and that are taken full-face (taken when you are facing the camera directly with your eyes looking straight at the camera).
- An invitation (in Swedish or English)
- Conference programme or the equivalent
- List of participants

För konferensbesök

- *Kopia av ditt pass*
- *Två fotografier i passformat som är tagna rakt framifrån och inte är äldre än sex månader.*
- *Inbjudan (på svenska eller engelska)*
- *Konferensprogram eller liknande*
- *Deltagarlista*



Family appendix for applicants – Appendix D

1 Your personal particulars

Surname, given name	Date of birth
---------------------	---------------

2 Personal particulars of your children

Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children



3 Personal particulars of your parents

Your father's surname, given name	Date of birth	Citizenship
Your mother's surname, given name	Date of birth	Citizenship
Your parent's home address		
Present temporary address, if any		
Are your parents living together? <input type="checkbox"/> Yes <input type="checkbox"/> No		

4 Personal particulars of brothers/sisters

Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to	Unmarried <input type="checkbox"/>	No. of children



Family appendix for applicants – Appendix D

1 Your personal particulars

Surname, given name	Date of birth
---------------------	---------------

2 Personal particulars of your children

Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children

Instructions on how to fill in this form

Så fyller du i den här blanketten

1 Your personal particulars

Enter your name and date of birth.

1 Dina personuppgifter

Här ska du fylla i ditt namn och din födelsetid.

2 Your children's particulars

Remember to enter the personal particulars of each of your children. If you have more than 10 children, you can enter their particulars on a separate sheet of paper

and include it with your application. Or you can ask for an extra Family Appendix form. These forms are available at the Swedish embassy/consulate and on the Migration Board's web site www.migrationsverket.se.

2 Dina barns personuppgifter

Här fyller du i personuppgifter för alla dina barn. Har du fler än 10 barn kan du skriva deras personuppgifter på ett löst papper som du bifogar ansökan. Du kan också be att få en extra familjebilaga. Den finns på ambassaden/konsulatet och på Migrationsverkets webbplats, www.migrationsverket.se.



3 Personal particulars of your parents

Your father's surname, given name	Date of birth	Citizenship
Your mother's surname, given name	Date of birth	Citizenship
Your parent's home address		
Present temporary address, if any		
Are your parents living together? <input type="checkbox"/> Yes <input type="checkbox"/> No		

4 Personal particulars of brothers/sisters

Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children
Surname, given name	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Citizenship
Country of residence	Married to <input type="checkbox"/>	Unmarried <input type="checkbox"/>	No. of children

3 Your parents' particulars

Enter full particulars.

3 Dina föräldrars personuppgifter

Här ska du fylla i samtliga uppgifter.

4 Particulars of brothers/sisters (siblings)

Remember to enter the personal particulars of each sibling. If you have more than 11 siblings you can enter their particulars on a separate sheet of paper and include it with your application. Or you can ask for an extra Family Appendix form. These forms are available at the Swedish embassy/consulate and on the Migration Board's web site www.migrationsverket.se.

4 Dina syskons personuppgifter

Här fyller du i personuppgifter för alla dina syskon. Om du har fler än 11 syskon kan du skriva deras personuppgifter på ett löst papper som du bifogar ansökan. Du kan också be att få en extra familjebilaga. Den finns på ambassaden/konsulatet och på Migrationsverkets webbplats, www.migrationsverket.se.