



N° 15934*01



Liberté • Égalité • Fraternité

RÉPUBLIQUE FRANÇAISE

French overseas territories Visa application form

Art. L211-1 and L611-6 of the Code for Entry and Residence of Foreigners and
Right of Asylum (CESEDA)

PHOTO

This form is valid for : Guadeloupe, French Guiana, Martinique, Réunion Island, Mayotte, New Caledonia, French Polynesia, Saint-Barthélemy, Saint Martin, Saint Pierre and Miquelon, French Southern and Antarctic Lands and the islands of Wallis and Futuna

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

| | | | | | |
|---|--|--|---|------------------------------|-----------------|
| 1. Surname [Family name] (1) : | | | | For official use only | |
| 2. Surname at birth [Former family name(s)] (1) : | | | | | |
| 3. First name(s) [Given name(s)] (1) : | | | | | |
| 4. Date of birth (day-month-year) : | | 5. Place of birth : | | 7. Current nationality : | |
| 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) | | | |
| 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 : | | | | | |
| 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 type="checkbox"/> Other travel document (please specify) : | | | | | |
| 13. Travel document number : | | 14. Date of issuance : | 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 the country of current nationality : <input type="checkbox"/> No <input type="checkbox"/> Yes : Residence permit or equivalent N° : Valid until : | | | | | |
| * 19. Current occupation : | | | | | |
| * 20. Employer and employer's address and telephone number. For students, name and address of educational establishment : | | | | | |
| 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"/> Studies <input type="checkbox"/> Medical reasons <input type="checkbox"/> Transit <input type="checkbox"/> Airport transit <input type="checkbox"/> Other (please specify) : | | | | | |
| 22. Territory of destination : | | | 23. Territory of first entry : | | |
| 24. Number of entries requested : <input type="checkbox"/> One 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 visa or French overseas territories visas issued during the past three years : <input type="checkbox"/> No <input type="checkbox"/> Yes. Date(s) of validity/...../.....,/...../.....,/...../..... | | | | | |
| 27. Fingerprints collected previously for the purpose of applying for a Schengen visa or French overseas territories visas : <input 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..... | | | | | |

Date of application :

Visa application number :

File handled by :

Application lodged at :
 Embassy/consulate :
 Prefecture
 CAC
 Service provider
 Commercial intermediary
 Border

Nom :

Other :

Supporting documents :
 Travel document
 Means of subsistence
 Invitation
 Means of transport
 TMI
 Other :

Visa decision :
 Refused

Issued
 A
 C
 LTV

Valid :
 from
 until

Number of days :

Number of entries :
 1 2 Multiples

| | | | |
|---|---------------|---|--|
| 29. Intended date of arrival in the French territory : | | 30. Intended date of departure from the French territory : | |
| * 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 travelling and living during the applicant's stay is covered : | | | |
| <input type="checkbox"/> by the applicant herself/himself Means of support : <input type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input type="checkbox"/> Credit card <input type="checkbox"/> Pre-paid accommodation <input type="checkbox"/> Pre-paid 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"/> Pre-paid 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 ascendent | | | |
| 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.

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 French VISABIO biometric database for a minimum 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 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 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 French authority responsible for processing the data is: **Commission Nationale de l'Informatique et des Libertés – 3 Place de Fontenoy - TSA 80715 - 75334 PARIS CEDEX 07**

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Pursuant to Act No 78-17 of 6 January 1978 on Data Processing, Files and Individual Liberties, I am aware that I have the right to obtain from the French government the communication of the data relating to me recorded in the VISABIO database and the right to request that such data which are inaccurate be corrected or possibly deleted only if processed unlawfully. This right of access to and possible correction of such data shall be exercised by applying to the head of mission or consular post.

It may be possible to refer to the National Commission on Data Processing and Liberties (CNIL) if I choose to question the conditions under which the personal data relating to me are protected.

I am aware that any incomplete application will increase the risk of my visa application being refused by the consular authority and that the said authority may have to retain my passport while my application is being processed

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 French law.

I have been informed that if over two months have elapsed with no reply since I submitted my request and received a receipt as proof, this implicitly means that my request has been denied. This decision can be contested through the Commission des recours contre les décisions de refus de visa (Appeals Commission for denied visas) , BP 83.609, 44036 Nantes CEDEX 1, France, within two months of the implicit decision.

I undertake to leave the French territory before the expiry of the visa, if granted, and if I have been refused the right to stay in France after the expiry of the visa.

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

* The fields marked with * do not need to 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. Visa applications for French overseas territories fall under an exception to regular rules of submission through electronic form (Order n°2015-1423 of November 5 2015 on exceptions to the enforcement of users' right of referral to the administration through electronic form.)