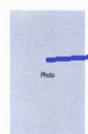


Application for Schengen Visa

This application form is free.



AFFIX THE PHOTOGRAPH AS PER THE SPECIFICATION MENTION IN WEBSITE

1 Surrame (Family name) (k)	SHANTHA		For official use only
Surname at birth (Former fan	nily name(s) (s)		Date of application
First name(s) (Given name(s)	W KUMAR	-	Vermine
Date of birth (Day-Month-Yes	Bangalore	Current nationality: India	File handled by:
12/01/1991	6 Country of birth India	Nationality at birth, if different	Application lodged at:
Sex Female	9 Martial status Single Martied Separated Other (please specify)	Divorced Wildowjer)	Entrasylvorsulate GAC Service provider Commercial intermediary Barder
0 in the case of minors; Sumar	ne, first name, address (if different from applicant's) and net $$\operatorname{NA}$$	onality of parvetal authory/legal guardian	Name Other
1 National identity number, who	ere applicable NA	· section	Invitation
Other travel document (s 3 Number of travel document K1234567		16 Issued by	Vas decision: Refused Nauer. A
17 Applicant's home address, e		91 8042401420	UV UV
18 Residence in a country other No Yes. Residence permit of	(vil)	(Ueil	
** MENTION DESIGNATION			Number of arthus
	dress and Wephone number. For students, name and addre COFFICE ADDRESS WHERE YOU by		Number of days:
Official visit	Cultural Sports Medical reasons Visit Aliport banel: Other Please specify)	ing family or friends	

NAME SHOULD BE AS PER THE PASSPORT

> IF APPLICABLE MENTION MINOR DETAILS

MENTION IF APPLICABLE

CHOOSE APPROPRIATE CATEGORY

22 Member State(s) of destination	23 Member State of first entry	AS PER THE TICKET {ONLY
FRANCE		SCHENGEN STATE CONSIDERED}
24 Number of entries requested	25 Duration of the intended stay or transit	
Single entry Two entries	Indicate number of days	TOTAL NUMBER OF DAYS IN
Multiple entries		SCHENGEN AREA
The fields marked with * shall not be filled in by family to free movement. Family members of EU, EEA or CH	members of EU, EEA or CH citizens (spouse, child or dependent ascendent) while exercising their right citizens shall present documents to prove this relationship and fill in fields N° 34 and 35.	SCHENGENAREA
(x) Fields 1–3 shall be filled in accordance with the dat	\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$\$P\$	
	J9	
26 Schengen visas issued during the past three years		COURNORN MEA ICCUED
□ No		SCHENGEN VISA ISSUED
Yes. Date(s) of validity from	to	DURING THE PAST 3 YEAR
27 Fingerprints collected previously for the purpose of ag No Yes	phying for a Schengen visa NA	
	Date, if known	MENTION NA
28 Entry permit for the final country of destination, where		
	NA	APPLICABLE ONLY IN
Issued by Valid from	urtil	TRANSIT CASE
29 Intended date of arrival in the Schengen area	30 Intended date of departure from the Schengen area	TRANSIT CASE
22/01/2015	30/01/2015	
"31 Surname and first name of the inviting person(s) in the accommodation(s) in the Member State(s)	Member State(s). If not applicable, name of hotel(s) or temporary	
	NAME OF THE PARTY	- T
HOTEL NA	ME	ACCOMODATION DETAILS IF SOME ON
300		IS INVITING HOST PERSON ADDRESS
Address and e-mail address of inviting person(s)/hotel(s)/f accommodation(s)		NEEDS TO BE FILL
HOTEL ADD		
PONE and the selection of the second of the	NUMBER	
"32 Name and address of inviting company/organisation	Telephone and telefax of company	
INVITING COMA	PNAY NAME	
Surname, first name, address, telephone, telefax and e-m	all address of contact person in company/organisation	THE COLUMN IS FOR RESIDENCE BURDOOF
INVITING COMPAN	AW ADDRESS	THIS COLUMN IS FOR BUSINESS PURPOSE ONLY OTHER CATEGORY MENTION NA
INVITING COMPA	NY ADDRESS	ONLY OTHER CATEGORY MENTION NA
"33 Cost of travelling and living during the applicant's stay	is covered	
SPONSOR N	VAME	
	2000-200	
by the applicant himself/herself	by a sponsor (host, company, organisation), please specify	
		YOU CAN CHOOSE ANY OPTION
Means of support:	referred to in field 31 or 32	
Cash =		
Traveller's chaques	other (please specify)	
☐ Credit card	Means of support	
_ January		
□ P		
Prepaid accommodation	Accommodation provided	
Prepaid transport	Consequences covered during the stay	

I am aware of and consent to the following: the collect applicable, the taking of fingerprints, are mandatory for the on the visa application form, as well as my fingerprints a processed by those authorities, for the purposes of a deciduction of the visa application form, as well as my fingerprints a processed by those authorities, for the purposes of a deciduction of the authorities competent for carrying out authorities and the authorities competent for carrying out authorities in the Member States for the purposes of we the Member States are fulfilled, of identifying persons whe the Member States are fulfilled, of identifying persons whether the member States are fulfilled, of identifying persons who the Member States are fulfilled, of identifying detection of the Member State responsible for processing the data codex 02 - France I am aware that I have the right to obtain in any of the Mistale which transmitted the data, and to request that data valued to the detect. At my express request, the authorit to check the personal data concerning me and have the State concerned. The national supervisory authority of the 75083 Paris cedex 02 - France) will hear claims concerning.	guardan) fused. eld No. 24): I insurance for my fi on of the data require e examination of the nd my photograph sion on my visa app on my application o VIS) (1) for a maxim hecks on visas at e vide not or visas on the ain conditions the d ain conditions the	irst stay and subsequent visits to the territory of Member States. If the distribution of parental authority/legal If the distribution of parental authority/legal If the distribution of the states are the distribution of the Member States (Incation, and any personal data concerning me which ap will be supplied to the relevant authorities of the Member States (Incation, or a decision whether to annual, revoke or extend a visa issued with num period of five years, during which it will be accessible to the external borders and within the Member States, immigration and asy notificions for the legal entry into, stay and residence on the territory of the legal entry into, stay and residence on the territory of the legal entry into, stay and residence on the territory of the legal entry into, stay and residence on the territory of the legal entry into, stay and residence on the territory of Member States, increased the states are the stay of the distribution of the legal entry into the states are the
35 Family relationship with an EU, EEA or CH observed and separate child and a spouse cho	37 Signature (for m guardian) fused. eld No. 24): I insurance for my fi on of the data require examination of the data require examination of the nd my photograph sion on my visa app on my application or vits) (1) for a maximithecks on visas at e fying whether the or do not or with one is an conditions the din conditions the din and investigation.	incrs, signature of parental authority/legal incrs, signature of parental authority/legal inst stay and subsequent visits to the territory of Member States. Intel by this application form and the taking of my photograph are visa application; and any personal data concerning me which ap will be supplied to the relevant authorities of the Member States illication. Or a decision whether to annual, revoke or extend a visa issued will num period of five years, during which it will be accessible to the external borders and within the Member States, immigration and asy conditions for the legal entry into, stay and residence on the territo onger fulfit these conditions, of examining an asylum application and asy conditions for the legal entry into, stay and residence on the territory.
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75083 Paris cedex 02 - France) will hear claims concerning	mber States notific a relating to me whi by examining my ap a corrected or delet	of terrorist offences and of other serious criminal offences. The authonate de l'Informatique et des Libertés - 8, rue Vivienne - 75083 i ation of the data relating to me recorded in the VIS and of the Mer ch are inaccurate be corrected and that data relating to me proce- plication will inform me of the manner in which I may exercise my led, including the related remedies according to the national law of
I declare that to the best of my knowledge all particulars: my application being rejected or to the annulment of a visu	the protection of pupplied by me are o	personal data. correct and complete. I am aware that any false statements will lea y may also render me liable to prosecution under the law of the Mer
State which deals with the application.	- July granted any	A most recovery the second of Propagations of Principle (1998) of the Miles
one of the prerequisites for entry into the European territo that I will be entitled to compensation if I fall to comply will	y of the Member St. h the relevant provis	e visa, if granted. I have been informed that possession of a visa is ates. The mere fact that a visa has been granded to me does not m sions of Article 5(1) of Regulation (EC) No. 562/2006 (Schengen Bon cicked again on entry into the European territory of the Member Str
Place and date		

BANGALORE

(1) In so far as the VIS is operational

SUBMISSION DATE (20/01/2015) IF IT IS APPLICABLE MENTION THE DETAILS

SIGNATURE OF THE APPLICANT IF ITS FOR MINOR (BELOW 18 YEAR) FATHER AND MOTHER OR GAURDIAN SIGNATURE IS REQUIRED

SIGNATURE OF THE APPLICANT IF ITS FOR MINOR (BELOW 18 YEAR) FATHER AND MOTHER OR GAURDIAN SIGNATURE IS REQUIRED