NATIONAL VISA – MEDICAL TREATMENT

Sr. #	Documents Required	submitted
1	**Application form and Appendix 20** — available online free of charge One application form and appendix is duly completed and signed by applicant.	
2	**Passport:** • Validity of a minimum of Six months from the date of expiry of the requested Visa • Signed by passport holder • Passport not older than 10 years (issued within the last 10 years) • A minimum of two blank pages to be used for visas	
3	**QID:** • Valid Qatar residence permit	
4	One recent biometric passport sized **photograph** (3.5x4,5 cm) with white background. Note: (not older than 6 months) • Not tilted picture (portrait style) showing both edges of face clearly. • Close up of the head and top of the shoulders so that the face takes up 70–80% of the photograph. • Photo in sharp focus and clear.	
5	**Overseas medical insurance** • Valid for the first month • Minimum coverage 30,000.00 € incl. repatriation.	
6	**Flight reservation** • Valid & confirmed flight reservation	
7	**Accommodation** Must be provided: • Lease Agreement signed by both parties; • or Proof of ownership of a residential property; • or Hotel booking for the first month.	
8	**Proof of the purpose of residence** • Formal statement from the host medical facility ***In case of accompanying family members proof of relation is required (marriage/birth certificate). In case of minors parental consent is needed.**	
9	**Proof of financial means – Bank statement** • Originally stamped and signed personal bank statements for all banks (current and savings) with salary income (minimum last 6 months) UpToDate (not older than 1 month from the date of submission). *Income must be equal or exceed 3.000.-EUR for at least six month before applying and must have this amount for the duration of stay.	

REMARKS to be filled out VFS staff (please tick what is applicable):

- **Applicant's documents are □ complete**

□ NOT complete - applicant has been informed of option to withdraw application to avoid possible refusal but wishes to submit application.

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Remarks:

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SIGNATURES and AGREEMENT

a) for Visa Applicant:

I HAVE READ AND AGREED TO THE TERMS AND CONDITIONS VALID FOR THE VISA APPLICATION AS PER ABOVE:

..... **.....**

CITY AND DATE **SIGNATURE OF THE APPLICANT**

b) for VFS staff:

APPLICANT HAS BEEN INFORMED OF THE ABOVE. THE REMARKS HAVE BEEN COMPLETED TOGETHER WITH APPLICANT)

..... **.....**

CITY AND DATE **SIGNATURE OF THE VFS STAFF.**