Application for national visa This form is free of charge

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1. Surname (s) (family name (s)) (x)	WYŁĄCZNIE DO UŻYTKU SŁUŻBOWEGO					
2. Surname (s) at birth (previously used	Data złożenia wniosku:					
3. First name (s) (x)	Numer wniosku:					
4. Date of birth (day – month – year)	Date of birth (day – month – year) 5. Place of birth 7. Current nationality:			Current nationality:	Wniosek złożono:	
	6. Country	6. Country of birth		ionality at birth (if different):	□ w ambasadzie lub konsulacie □ u usługodawcy □ u pośredniczącego podmiotu	
8. Sex:	ex: 9. Marital status:				komercyjnego	
☐ male ☐ female	☐ male ☐ female ☐ single ☐ married ☐ separated			☐ separated	☐ u przedsiębiorcy, o którym	
_		☐ divorced ☐ widow (-er) ☐ other (please specify)			mowa w art. 79a ust. 2 ustawy z dnia 12 grudnia 2013 r. o cudzoziemcach (Dz. U. z 2021 r. poz. 2354, z późn. zm.)	
10. In the case of minors: surname, first r address and citizenship of the person					☐ w urzędzie obsługującym	
address and endensing of the person	exercising paren	nui uunorny/regui g	,uar ar		ministra właściwego do spraw zagranicznych	
11. National identification number (if app	olicable)				□ inne	
12. Type of travel document:	Nazwa podmiotu przyjmującego					
☐ ordinary passport ☐ diplomatic p	oassport 🗆 serv	rice passport \square offic	cial pa	assport	wniosek	
☐ special passport ☐ other travel do	ocument (please	specify)			w · 1 · · · · · · · · · · · · ·	
13. Travel document's number	14. Issue date	15. Expiry date		16. Issued by (country name)	Wniosek przyjęty przez (imię i nazwisko osoby przyjmującej wniosek)	
17. Home address and e-mail address	Dokumenty uzupełniające: ☐ dokument podróży ☐ środki utrzymania ☐ zaproszenie					
18. Residence in a country other that the c	☐ środek transportu					
□ no	podróżne ubezpieczenie					
Residence permit or equivalent	medyczne inne:					
• •						
* 19. Current occupation * 20. Employer and employer's address and e-mail address. For students – the name and address of the school. For students or doctoral students – the name and address of the headquarters of the unit providing first-cycle studies, second-cycle studies or unified master's studies or education in a doctoral school and information about the field of study, and in the case of a doctoral school - information about scientific or artistic disciplines, as well as information about the semester or year					Decyzja o wizie krajowej: odmowa wydania wizy wydanie wizy	
discipinies, as wen as information a	☐ Termin ważności:					
	Od					
	Do					
21. Main purpose (s) of the journey:	Liczba wjazdów:					
☐ tourism ☐ business ☐ visit to	□ 1 □ 2 □ wielokrotne					
☐ official visit ☐ health reason ☐ study ☐ other (please specify) Grounds:					Liczba dni:	

22. Destination countryPOLAND		when the minister case ref	er State of first entry (not applicable the application is submitted to the rin charge of foreign affairs in the ferred to in Article 79a(1) of the Act aigners of 12 December 2013)		
24. Number of entries requested:	25.	. Duratio			
☐ single entry ☐ two entries ☐ multiple	entries	(please	indicate number of days)		
26. Schengen and national visas issued to the fore	igner during the la	last 5 yea	rs:		
□ no					
dates of validity from					
dates of validity from					
dates of validity from					
dates of validity fromdates of validity from					
27. Fingerprints collected previously for the purpo					
□ no	□ yes	•	•		
□ 110		ı)			
28. Entry permit for the final country of destination	on				
N	OT APPLICABL	LE			
20 1 1 1 1 2 6 1 1 1 1 2 1 1 6 1 1	1 20 1	. 1 1 1			
29. Intended date of arrival to the Republic of Poland (not applicable when the application is submitted to the minister in charge of foreign affairs in the case referred to in Article 79a(1) of the Act on Foreigners of 12 December 2013) 30. Intended date of departure from the Republic of Poland					
* 31. Surname and name (s) of the inviting person (s) or temporary accommodation (s) in the I	Republic of Polanc	id.			
Address and e-mail address of the inviting person (s) / hotel / temporary address (s) Phone number					
* 32. Name and address of the inviting company/organisation			Phone number and fax of company/organisation		
Full name, business address, business telephone a in the company/organisation:	nd fax number and	d busines	ss e-mail address of the contact person		
* 33. Cost of travelling and living during the appl	licant's stay is cov	vered by			
☐ the applicant himself/herself	☐ sponsor ((host, co			
Means of livelihood	□ referr	red to in			
□ cash		r (please			
☐ traveler's cheques	Means of live	elihood			
•	□ cash				
	□ credit card □ accommodation				
☐ prepaid accommodation ☐ all expenses covered during the stay					
☐ prepaid transport ☐ prepaid transport					
☐ other (please specify)	□ other (plea	ase speci	fy)		

* 34. Information on the work applications, declaration permit					
35. Personal data of a family of the European Free Trade of the Swiss Confederation					
Surname		Name (s)			
Date of birth	Citizenship	Number of travel or identity document			
36. Family relationship with a Free Trade Association (EFI Confederation ☐ spouse ☐ child ☐ g					
37. Place and date Signature (for the minor, by the parents, a guardian appointed by a court or other competent authority, or one of the parents if only that parent has parental authority, for an unaccompanied minor - a guardian or any other entity representing the minor appointed by a court or other competent authority, for a fully incapacitated person - a guardian appointed by a court or other competent authority)					
I am aware that in case of refusal of a visa, the consular fee or the corresponding fee for acceptance and processing by the Minister responsible for foreign affairs is non-refundable.					
Applies to applications for a	national multiple-entry visa (cf. field	No 24):			
I am aware that for my first stay and for subsequent visits to the territory of the Republic of Poland I need to have an adequate health insurance as defined in the provisions on health care services financed from public funds or travel medical insurance.					
I declare that to the best of my knowledge all details submitted by me are correct and complete. I am aware that submitting an application or enclosing documents containing false personal data or false information, as well as false statements, concealing the truth, counterfeiting or falsifying a document for the purpose of using it as an authentic one or using such a document as an authentic one will result in the refusal to issue a national visa or in the annulment of an already issued national visa, and that such behaviour constitutes a crime punishable by a fine, restriction of freedom or imprisonment under the Polish law.					
I undertake to leave the territory of the Republic of Poland no later than on the last day of the period of stay to which the national visa issued to me entitles me.					
I am aware that possession of a national visa is only one of the conditions for entry into the territory of the Republic of Poland. Obtaining a national visa does not imply the acquisition of the right to compensation in case I am refused entry to the territory of the Republic of Poland as a result of failure to meet the entry conditions set out in the Act on Foreigners of 12 December 2013. The conditions to be met for entry will be checked again when entering the territory of the Republic of Poland.					
I am aware that a national visa already issued may be revoked if I no longer fulfil the conditions for its issue.					
If an application for a national visa in order to take up or continue full-time: first-cycle studies, second-cycle studies or uniform master's studies or to study at a doctoral school, to conduct research or development work, to participate in an internship or to participate in a European Voluntary Service programme has not been accompanied by all the documents necessary to confirm the data contained in the application and the circumstances justifying the application for the visa, the applicant has the right to supplement them within 7 days of submitting the application.					
Place and date		Signature (for the minor, by the parents, a guar competent authority, or one of the parents if or or a guardian appointed by a court or other cor unaccompanied minor - a guardian or any othe appointed by a court or other competent author guardian appointed by a court or other competent	nly that parent has parental authority, npetent authority, for an r entity representing the minor city, for a fully incapacitated person - a		

(x) The details entered in fields 1 to 3 should correspond to those on the travel document.

The questions marked with "*" shall not be answered by family members of a citizen of a Member State of the European Union, a Member State of the European Free Trade Association (EFTA) - a party to the Agreement on the European Economic Area or the Swiss Confederation (spouse, child or dependent ascendant) exercising their right to free movement. Family members of a citizen of a Member State of the European Union, of a Member State of the European Free Trade Association (EFTA) - a party to the Agreement on the European Economic Area or of the Swiss Confederation, shall present documents proving their relationship and complete fields 35 and 36.