



Protocol number

Visa number

VISA APPLICATION FORM

| | | | |
|---|---|---|---|
| 01 - Full name <i>(as per passport; do not abbreviate or omit any name)</i> First Middle Last | | | Attach photo here - size: 40 mm x 35mm (1 9/6 x 1 3/8 inches) - white or off-white background - front view, full face - must be recent picture |
| 02 - Place of birth (city/state/country) | | 03 - Date of birth Day Month Year | |
| 04 - Country of citizenship | 05 - Sex male <input type="checkbox"/> female <input type="checkbox"/> | 06 - Marital status | |
| 07 - Passport # | 08 - Issuing country | 09 - Expiration date Day Month Year | |
| 10 - Parent's full name <i>(do not abbreviate or omit any name)</i> and country of citizenship Father's: _____ Mother's: _____ | | | |
| 11 - Highest level of education (check only one box) <input type="checkbox"/> no diploma <input type="checkbox"/> high school diploma or the equivalent (e.g., GED) <input type="checkbox"/> some college credit, but less than one year <input type="checkbox"/> more than one year of college, but no degree <input type="checkbox"/> associate's degree (e.g., AA, AS) <input type="checkbox"/> bachelor's degree (e.g., BA, AB, BS) <input type="checkbox"/> master's degree <input type="checkbox"/> professional degree (e.g., MD, DDS DVM, LLB, JD) <input type="checkbox"/> doctorate degree | | 12 - Major/primary field of study | |
| | | 13 - List any special skill and/or certificates | |
| | | 14 - Job position <i>(as per business card)</i> or title | |
| | | 15 - Employer <i>(for students, name school/university)</i> | |
| | | 16 - E-mail: | |
| 17 - Business address | | 18 - Business telephone # (with area code) | |
| 19 - Home address | | 20 - Home telephone # (with area code) | |

FOR OFFICIAL USE ONLY

| | | | | | |
|---|--|--|--|---------------------------------|--|
| A - Consulta à SERE OF TEL No. _____ | | B - Autorização da SERE DESP DESPTTEL No. _____ | | C - Tipo do Visto _____ | |
| D - Concessão Denegação Impedimento | | E - Uma entrada Múltiplas entradas | | F - Validade _____ anos/dias | |
| G - Data ____/____/____ | | H - Observações | | | |
| I - Assinaturas | | | | | |
| Funcionário | | | | Chefia | |

21 - Purpose of trip (check item that is the most applicable to the circumstances of your trip)

- Provide services in Brazil of a temporary nature, including activities such as office and technical support, installation and repair of equipment, including computer and telecommunications systems, construction activities, and direct supervision of personnel in Brazil
- U.S.-based personnel involved in business development activities, including negotiating contracts, marketing, opportunity assessments, specifying orders for contracts, customer relations related activities, performance assessments, project reviews, and establishing a framework for doing business in Brazil
- Direct participation in oil and gas exploration and/or production activities
- Work under an employment contract with a company/organization in Brazil - i.e., hired under a Brazilian labor contract as a local employee (this applies to the foreign employees of multinationals working in their Brazilian subsidiaries)
- Transfer of residence to Brazil under permanent residency status
- Attend conference, seminar or workshop (note under "Comments" below whether attendee, paid/unpaid speaker, trainer, and provide name of event sponsor)
- Provide religious or missionary services and/or assistance
- Provide community and/or medical services
- Attend school or pursue studies
- Conduct research or pursue scientific-technologic activities under an international cooperation program
- Pursue professorial studies/research/teaching and/or pursue scientific/technologic activities at an university, research or similar organization (attach letter specifying conditions: employment contract? research scholarship?)
- Participation in athletic or performing arts events (note under "Comments" below whether paid/unpaid participation)
- Journalism activities and/or film making
- As a government official
- Tourism, visit friend(s) and/or relatives (under "Comments" below provide further insight on intended trip and, as applicable, list relationship to parties being visited)
- Other: _____

Comments: _____

22 - Expected port of entry and date of arrival in Brazil

23 - Expected duration of immediate trip

24 - Name and address of person, institution or company through whom you can be contacted in Brazil

25 - Address in Brazil where you will be staying (e.g., hotel, vessel, friend, other)

26 - Telephone # in Brazil (with city code)

27 - Have you ever been to Brazil?

- Yes No

28 - If yes for item 27, provide date, place and duration of last visit

IMPORTANT: FORMS THAT ARE INCOMPLETE AND INCORRECTLY FILLED OUT WILL BE RETURNED. CAREFULLY READ AND FOLLOW INSTRUCTIONS AT THE BOTTOM OF THIS PAGE.

29 - I declare that the above information is true and accurate.

Name (type or print)

Date

Signature

Day

Month

Year

INSTRUCTIONS

- ◆ Type or write in block letters, on blue or black ink only. Form can be filled out on line.
- ◆ Complete first and second pages, except for box marked "For Official Use Only".
- ◆ Answer all questions thoroughly and accurately. If a question does not apply, please type N/A.
- ◆ Sign and date each form. Original signature is mandatory (no photocopy).