



# VISA APPLICATION

**IMPORTANT!** Please type or print using ballpoint

I declare that data supplied by me is 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 Russian law. I undertake to leave the territory of the Russian Federation upon the expiry of the visa, if granted. I understand that possession of a visa does not entitle its bearer to enter Russia. I will not seek compensation if I am refused to enter Russia.

**\*\* - not to be filled by holders of diplomatic and official passports**

|                                                                                                                                                                                                                                                                                                          |                                                                     |                                                                                                                                                    |                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <b>1. Nationality</b> (If you formerly had USSR or Russian citizenship, please indicate when and why you lost it)<br>_____<br>_____                                                                                                                                                                      |                                                                     | <b>6. Purpose of visit</b><br>_____                                                                                                                |                                                              |
| <b>2. Last name</b> (as in passport)<br>_____                                                                                                                                                                                                                                                            |                                                                     | <b>7. Category and type of visa</b><br>_____                                                                                                       |                                                              |
| <b>3. First and middle names</b> (as in passport)<br>_____                                                                                                                                                                                                                                               |                                                                     | <b>8. Number of entries</b><br>Single entry <input type="checkbox"/> Double entry <input type="checkbox"/> Multiple entry <input type="checkbox"/> |                                                              |
| <b>4. Date of birth</b><br>(dd/mm/yy) _____                                                                                                                                                                                                                                                              | <b>5. Sex</b> M <input type="checkbox"/> F <input type="checkbox"/> | <b>9. Date of entry in Russia</b><br>_____ (dd/mm/yy)                                                                                              | <b>10. Date of departure from Russia</b><br>_____ (dd/mm/yy) |
| <b>11. Passport No</b> _____<br><b>Issued by</b> _____                                                                                                                                                                                                                                                   |                                                                     | <b>Date of issue</b> (dd/mm/yy) _____<br><b>Valid until</b> (dd/mm/yy) _____                                                                       |                                                              |
| <b>12. Type of passport</b><br>diplomatic <input type="checkbox"/> official <input type="checkbox"/> tourist <input type="checkbox"/><br>other <input type="checkbox"/> please specify _____                                                                                                             |                                                                     |                                                                                                                                                    |                                                              |
| <b>13. Russian institution or organization to be visited?</b> (for tourists – name and reference number of the host tourist company, for businessmen – name of the host organization and town, for private persons – last name, first name, middle names and home address of the host)<br>_____<br>_____ |                                                                     |                                                                                                                                                    |                                                              |
| <b>14. Itinerary</b> (places of visit)<br>_____<br>_____                                                                                                                                                                                                                                                 |                                                                     |                                                                                                                                                    |                                                              |
| <b>**15. Do you have a medical insurance valid in Russia?</b><br>yes <input type="checkbox"/> Please specify? _____ no <input type="checkbox"/>                                                                                                                                                          |                                                                     |                                                                                                                                                    |                                                              |
| <b>16. Who will pay for your trip to and stay in Russia?</b><br>_____<br>_____                                                                                                                                                                                                                           |                                                                     |                                                                                                                                                    |                                                              |
| <b>17. Marital status</b><br>married <input type="checkbox"/> single (never married) <input type="checkbox"/> divorced <input type="checkbox"/> separated <input type="checkbox"/> widowed <input type="checkbox"/>                                                                                      |                                                                     |                                                                                                                                                    |                                                              |
| <b>18. Spouse's full name</b> (if divorced or separated, please indicate maiden name if applicable)<br>_____                                                                                                                                                                                             |                                                                     |                                                                                                                                                    | <b>19. Spouse's date of birth</b><br>(dd/mm/yy) _____        |
| <b>20. Spouse's place of birth</b><br>_____                                                                                                                                                                                                                                                              |                                                                     |                                                                                                                                                    |                                                              |
| <b>**21. Your father's full name</b><br>_____                                                                                                                                                                                                                                                            |                                                                     | <b>**22. Your mother's full name</b><br>_____                                                                                                      |                                                              |
| <b>23. Have you ever been issued a Russian visa?</b> (When and where?)<br>_____<br>_____                                                                                                                                                                                                                 |                                                                     |                                                                                                                                                    |                                                              |
| <b>**24. Has your passport ever been lost or stolen?</b><br>yes <input type="checkbox"/> no <input type="checkbox"/>                                                                                                                                                                                     |                                                                     |                                                                                                                                                    |                                                              |
| <b>**25. List all countries you have visited in the last ten years and indicate the year of visit</b><br>_____<br>_____<br>_____                                                                                                                                                                         |                                                                     | <b>**26. List all countries which have ever issued you a passport</b><br>_____<br>_____<br>_____                                                   |                                                              |
| <b>**27. List your last two places of work, excluding the current one</b>                                                                                                                                                                                                                                |                                                                     |                                                                                                                                                    |                                                              |
| 1. Name _____<br>Address _____<br>Your position _____                                                                                                                                                                                                                                                    |                                                                     | Phone number _____<br>Your chief's surname _____<br>Dates of joining – dismissal _____ (mm/yy) _____ (mm/yy)                                       |                                                              |
| 2. Name _____<br>Address _____<br>Your position _____                                                                                                                                                                                                                                                    |                                                                     | Phone number _____<br>Your chief's surname _____<br>Dates of joining – dismissal _____ (mm/yy) _____ (mm/yy)                                       |                                                              |

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**\*\*28. List all educational institutions you ever attended, except high schools**

|                 |                                                   |
|-----------------|---------------------------------------------------|
| 1. Name         | Address and phone number                          |
| Course of study | Dates of admission and graduation (mm/yy) (mm/yy) |
| 2. Name         | Address and phone number                          |
| Course of study | Dates of admission and graduation (mm/yy) (mm/yy) |

**\*\*29. List all professional, civil and charity organizations which you are / were a member of or cooperate / cooperated with**

**\*\*30. Do you have any specialized skills, training or experience related to fire-arms and explosives or to nuclear matters, biological or chemical substance? If yes, please specify**

**\*\*31. Have you ever performed a military service? If yes, indicate the country, branch of service, rank, military occupation and dates of service**

**\*\*32. Have you ever been involved in an armed conflicts, either as a member of the military service or a victim? If yes, please specify**

**33. IMPORTANT! EACH APPLICANT MUST READ AND GIVE ANSWERS TO THE FOLLOWING QUESTIONS**

**A visa may be refused to persons who are within specific categories defined by the law as inadmissible to Russia.**

|                                                                                                                                                                                         |                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>Have you ever been arrested or convicted for any offence?</b>                                                                                                                        |                                                             |
| yes <input type="checkbox"/> When? (dd/mm/yy)                                                                                                                                           | Where? <input type="checkbox"/> no <input type="checkbox"/> |
| <b>Have you ever been afflicted with a communicable disease of public health significance or a dangerous physical or mental disorder? Have you ever been a drug abuser or a addict?</b> |                                                             |
| yes <input type="checkbox"/>                                                                                                                                                            | no <input type="checkbox"/>                                 |
| <b>Have you ever been refused a Russian visa?</b>                                                                                                                                       |                                                             |
| yes <input type="checkbox"/> When? (dd/mm/yy)                                                                                                                                           | Where? <input type="checkbox"/> no <input type="checkbox"/> |
| <b>Has your Russian visa ever been canceled?</b>                                                                                                                                        |                                                             |
| yes <input type="checkbox"/> When? (dd/mm/yy)                                                                                                                                           | Where? <input type="checkbox"/> no <input type="checkbox"/> |
| <b>Have you ever tried to obtain or assisted others to obtain a Russian visa or enter Russia by providing misleading or false information?</b>                                          |                                                             |
| yes <input type="checkbox"/>                                                                                                                                                            | no <input type="checkbox"/>                                 |
| <b>Have you ever overstayed your Russian visa or stayed unlawfully in Russia?</b>                                                                                                       |                                                             |
| yes <input type="checkbox"/>                                                                                                                                                            | no <input type="checkbox"/>                                 |
| <b>Have you ever been deported from Russia?</b>                                                                                                                                         |                                                             |
| yes <input type="checkbox"/> When? (dd/mm/yy)                                                                                                                                           | Where? <input type="checkbox"/> no <input type="checkbox"/> |

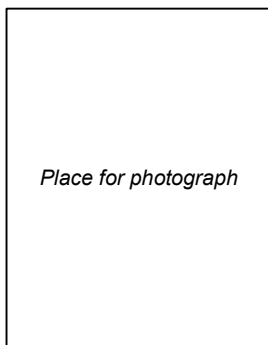
**Your answer yes in item 33 does not automatically signify ineligibility for a visa. In this case you may be required to personally appear before a consular officer.**

**34. Name, address and phone number of a person or hotel in Russia that you plan to stay with**

**35. Has this application been completed personally by you? If no, indicate the person completing this application in item 36** yes ☐ no ☐

**36. Application completed:** Surname, first name

Relationship to applicant Applicant's address



I agree to my personal data on this application form being processed and communicated to the appropriate Russian authorities for the issue of a visa.

Date (dd/mm/yy), applicant's signature

|                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------|
| <b>37. Other names ever used</b> (maiden name, pen-name, holy orders, et..)                                                |
| <b>38. Your permanent address, phone and fax number, E-mail</b>                                                            |
| <b>39. Place of birth</b> (If born in Russia, please indicate when and what country you emigrated to)                      |
| <b>40. Place of work or study, present position</b> (name, address, phone and fax numbers, E-mail)                         |
| <b>41. Are any of your relatives staying in Russia now?</b> (full name, relation degree, date of birth, permanent address) |