



REPÚBLICA FEDERATIVA DO BRASIL
 MINISTÉRIO DAS RELAÇÕES EXTERIORES
 EMBAIXADA DO BRASIL EM NOVA DELHI

Pedido de Visto
VISA APPLICATION FORM

Protocolo _____

Visto _____

INSTRUCTIONS

- ◆ Please print the form back to back, TYPE or WRITE (USING BLUE INK ONLY) IN BLOCK LETTERS.
- ◆ Answer all questions (1-26) thoroughly and accurately. If a question does not apply, please type N/A.
- ◆ Only Applicants must fill, sign and date the form (Both parents must sign the form in case of minors).
- ◆ Incomplete forms will be returned.

A - DADOS PESSOAIS (PERSONAL INFORMATION)

01 - Name (First/Middle/Family Name as on passport)			Paste 2" x 2" Photo (Not more than six months old and with a clear background) Here
02 - Place of Birth (city/state/country)		03 - Date of birth Day Month Year	
04 - Nationality	05 - Sex (M/F)	06 - Marital Status (Single/Married/Divorced)	
07 - Passport No.	08 - Issuing Country	09 - Passport Expiry Date (D/M/Y)	
10 - Parent's Name and Nationality (No abbreviations)			Nationality
Father's: _____			
Mother's: _____			
11 - Residential Address		12 - Telephone no. (country code + city code + telephone no.)	13 - Profession
14 - Business Address		15 - Telephone no. (country code + city code + telephone no.)	16 - Employer
17 - Job Position or Title		18 - E-mail	
Draft Details (Bank, Draft No, Date, Amount)			

PARA USO OFICIAL (FOR OFFICIAL USE ONLY)

A - Consulta à SERE OF <input type="checkbox"/> TEL <input type="checkbox"/> No. _____		B - Autorização da SERE DESP <input type="checkbox"/> DESPTEL <input type="checkbox"/> No. _____		C - Tipo do Visto _____	
D - <input type="checkbox"/> Concessão <input type="checkbox"/> Denegação <input type="checkbox"/> Renovação		E - Entradas <input type="checkbox"/> Uma <input type="checkbox"/> Múltiplas		F - Prazo de Entrada _____ anos/dias	
G - Data ____/____/____		H - Observações			
I - Assinaturas					
Funcionário _____				Chefia _____	

19 - Purpose of trip (check one item that is the most applicable to the circumstances of your trip, Specify / Underline)

- In Brazil - engaged in services of temporary or permanent nature, including in-field services under contract and/or intra-company activities such as project management, technical support, training, auditing/accounting in Brazil.
 - Headquarters-based business development activities, including negotiating contracts, executive meetings, marketing assessment, specifying orders in contracts, customer relations related activities, performance assessment, establishing framework for doing business in Brazil.
 - Import/Export business.
 - Work on offshore platform/ship.
 - Work under an employment contract with a company/organization in Brazil.
 - Attend conference, seminar or workshop (attendee? Paid/unpaid speaker? Trainer? Name event sponsor).
 - Professional training as an intern.
 - 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 professional studies/research/teaching and/or pursue scientific/technologic activities at an university, research or similar organization (employment contract? Short term pro-labore? Research scholarship?)
 - Participation in athletic or performing arts events (paid/unpaid participation?)
 - Journalism activities and/or film making.
 - Official government mission/business.
 - Visit friend(s) and/or relatives (inform below relationship; provide name and address on item 20).
 - Tourism (inform below location, nature of trip, etc.)
 - Others: _____
- Comments: _____

20 - Name and address of person, institution or company where you can be contacted in Brazil

21 - Address while in Brazil

22 - Telephone #

23 - Place and date of arrival

24 - Destination

25 - Duration of intended stay (in days or years)

26 - Have you ever been to Brazil?

Yes No

If yes, inform when, place and duration of stay

B - TERMO DE RESPONSABILIDADE (FORMAL STATEMENT TO BE FILLED AND SIGNED BY APPLICANT ONLY)

27 - I declare that the above information is true and accurate. (I have also read the rules and regulations in force)

Date

Name	Day	Month	Year	Signature