



| DADOS PESSOAIS / PERSONAL INFORMATION  |  |  | PROTOCOLO Nº                            |
|--|--|--|---|
| 01 - NOME COMPLETO (FIRST/MIDDLE/FAMILY NAME)  |  |  | VISTO Nº                                |
| 02 - NASCIDO EM (cidade/estado/país)<br>PLACE OF BIRTH (city/state/country)            |  | 03 - data de nascimento(dia/mês/ano)<br>date of birth (day/month/year) | ATTACH<br>3 X 4 cm<br><br>PHOTO<br>HERE |
| 04 - NACIONALIDADE<br>NATIONALITY  | 05 - SEXO<br>SEX                       | 06 - ESTADO CIVIL<br>MARITAL STATUS                                    |   |
| 07 - DOCUMENTO DE VIAGEM<br>PASSPORT OR<br>TRAVEL DOCUMENT                             | 08 - PAÍS EXPEDIDOR<br>ISSUING COUNTRY | 09 - EXPIRAÇÃO (dia/mês/ano)<br>EXPIRATION DATE (d/m/y)                |   |
| 10 - NOME DOS PAIS / NAME OF PARENTS<br><br>do pai/father _____<br>da mãe/mother _____ |  |  |   |
| 11 - ENDEREÇO RESIDENCIAL / HOME ADDRESS   |  | 12 - TELEFONE Nº<br>TELEPHONE Nr                                       | 13 - PROFISSÃO<br>PROFESSION            |
| 14 - ENDEREÇO PROFISSIONAL /BUSINESS ADDRESS   |  | 15 - TELEFONE Nº<br>TELEPHONE Nr                                       | 16 - EMPREGADOR<br>EMPLOYER             |
|  |  | 17 - TÍTULO OU POSIÇÃO / TITLE OR JOB POSITION                         |   |
| 18 - ENDEREÇO ELETRÔNICO / E-MAIL ADDRESS  |  |  |   |

**FAVOR PREENCHER À MÁQUINA OU EM LETRA DE FORMA. RESPONDER AOS ITENS 1 A 26 (FRENTE E VERSO) E ASSINAR. FORMULÁRIOS INCOMPLETOS SERÃO DEVOLVIDOS. PLEASE TYPE OR PRINT. ANSWER ITEMS 1 THROUGH 26 (FRONT AND OVERLEAF) AND SIGN. INCOMPLETE FORMS WILL BE RETURNED.**

| PARA USO OFICIAL / FOR OFFICIAL USE ONLY  |  |  |  |
|---|--|--|--|
| A - Consulta à SERE<br>_____ Nº. _____  |  | B - Autorização da SERE<br>_____ Nº. _____       |  |
| C - Tipo do Visto<br>_____  |  |  |  |
| D -<br><input type="checkbox"/> Concessão<br><input type="checkbox"/> Denegação<br><input type="checkbox"/> Prorrogação | E - Entradas<br><input type="checkbox"/> Uma<br><input type="checkbox"/> Múltiplas | F - Prazo de Estada<br>_____anos/dias            | G - Data<br>_____/_____/_____<br>dia mês ano |
| H - Observações   |  | I - Assinaturas<br><br>Funcionário<br><br>Chefia |  |

**PERSONAL INFORMATION**

19 - Purpose of trip (check **ONE** item best applicable to the circumstances of your trip)

- Tourism or visit friends and relatives (no paid activities are allowed).
- Business development activities, negotiating contracts, executive meetings, marketing assessment, specifying orders in contracts, customer relations related activities, performance assessment, establishing framework for doing business in Brazil, etc.
- Import/Export business.
- Investment.
- In-country provision of 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.
- Work on offshore platform/ship.
- Work under an employment contract with a company/organization in Brazil.
- Transit through Brazil.
- Attend conference, seminar or workshop (please specify your position at the conference and the event sponsor).
- Participation in athletic or performing arts events (please specify if money will be involved and if spectators will pay for attending the event).
- Professional training as an intern.
- Studies/research/teaching and/or scientific/technologic activities at an university or research institute.
- Religious, missionary services or assistance.
- Adoption.
- Community or voluntary work.
- Student exchange program (please name the intervening entity).
- To attend a language course (please name the school).
- The trip includes visit to areas inhabited by indigenous population.
- Journalism activities or film making.
- Official mission.
- Permanent Visa, please specify if it is based on family reunion or working contract.
- Other purpose, please elaborate:

20 - NOME E ENDEREÇO DA PESSOA, ENTIDADE OU EMPRESA DE CONTATO NO BRASIL  
 NAME AND ADDRESS OF PERSON, INSTITUTION OR COMPANY WHERE YOU CAN BE CONTACTED IN BRAZIL

21 - ENDEREÇO NO BRASIL  
 ADDRESS IN BRAZIL

22 - TELEFONE Nº  
 TELEPHONE NO.

23 - LOCAL E DATA DE DESEMBARQUE  
 PLACE AND DATE OF ARRIVAL

24 - DESTINO  
 DESTINATION

25 - PERÍODO DA ESTADA  
 LENGTH OF INTENDED STAY

26 - JÁ ESTEVE NO BRASIL?  
 HAVE YOU EVER BEEN IN BRAZIL?  SIM YES  NÃO NO

EM CASO AFIRMATIVO, PERÍODO/LOCAL/DURAÇÃO DA ÚLTIMA ESTADA  
 IF YES, PLEASE INFORM PLACE AND TIMEFRAME

**B - DECLARAÇÃO / FORMAL STATEMENT**

27 - Declaro que as informações acima são verdadeiras.  
 I hereby declare that the above information is true and accurate.

Nome / Name

Data / Date

Assinatura / Signature

D/D

M/M

A/Y