

## REPÚBLICA FEDERATIVA DO BRASIL MINISTÉRIO DAS RELAÇÕES EXTERIORES

| Protocol number | Visa number |  |  |
|-----------------|-------------|--|--|
|                 |             |  |  |

## **VISA APPLICATION FORM**

| 01 - Full name (as per passport; do not abbreviate or omit any name) First Middle Last   |   |  | Attach photo here                          |                      |  |
|--|---|--|--|----------------------|--|
| 02 - Place of birth (city/state/co   | ountry)                                       | 03 - Date of Day   | of birth<br>Month                          | Year                 | - size: 2" x 2"                                  |
| 04 - Country of citizenship  | 05 - Sex male  fe                             | emale  | 06 - Marital status                        |                      | - white or off-white background                  |
| 07 - Passport#   | 08 - Issuing coun                             | try  | 09 - Expirati                              | on date<br>onth Year | - front view, full face - must be recent picture |
| 10 - Parent's full name (do not abbreviate or omit any name) and country of citizenship  Father's:  Mother's:  |   |  |  |                      |  |
| 11 – Highest level of education (check only one box) 12 - Maj  |   | 12 - Major/pr  | ajor/primary field of study                |                      |  |
| <ul> <li>□ no diploma</li> <li>□ high school diploma or the equivalent (e.g., GED)</li> <li>□ some college credit, but less than one year</li> <li>□ more than one year of college, but no degree</li> <li>□ associate's degree (e.g., AA, AS)</li> <li>□ bachelor's degree (e.g., BA, AB, BS)</li> <li>□ master's degree</li> <li>□ professional degree (e.g., MD, DDS DVM, LLB, JD)</li> </ul> |   | 13 - List any special skill and/or certificates  14 - Job position (as per business card) or title  15 - Employer (for students, name school/university)  16 - E-mail: |  |                      |  |
| doctorate degree   |   |  |  |                      |  |
| 17 - Business address  |   |  | 18 - Business telephone # (with area code) |                      |  |
| 19 - Home address  |   |  |  | 20 - Home telep      | phone # (with area code)                         |
| FOR OFFICIAL USE ONLY  |   |  |  |                      |  |
| A - Consulta à SERE  OF □ TEL □ No   |   | utorização d   | a SERE<br>EL □ No                          | -                    | o do Visto                                       |
| D - □ Concessão □ Denegação □ Impedimento  | E - Uma entrada F - Valid  Múltiplas entradas |  | F - Validad                                | eanos/dias           | G - Data   |
| H - Observações I - Assinaturas  |   |  |  |                      |  |
|  |   | A  | nálise                                     | Digitação            | Chefia   |

| 1 - 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.Sbased 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  Participation in a scientife/academic seminar or conference sponsored by a research or academic institution (note under "Comments" below whether attendee, paid/unpaid speaker, and provide name of event sponsor, attach invitation letter from Brazil)  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 academic 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, attach invitation letter from Brazil)  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 |  |  |  |  |  |  |
| 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 Offical 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).   |  |  |  |  |  |  |