

APPLICATION FOR VISA (STAY UP TO 3 MONTHS)

DEMANDE DE VISA (SEJOUR PENDANT 3 MOIS AU MAXIMUM)

Fyrir maka og börn eldri en 18 ára skal fylla út sérstakt eyðublað. • Separate application is required for spouse and accompanying children over the age of 18. • Une demande séparée est requise pour le conjoint et les enfants âgés de plus 18 ans accompagnant le demandeur.

FOTO 3,5 x 4,5 cm

Afhæðist íslensku sendiráði eða ræðismannaskrifstofu ásamt mynd og vegabréfi. Notið BLOKKSTAFL • To be submitted with passport and photo to Icelandic embassy or consulate. Write in Latin BLOCK LETTERS. • La demande doit être remise à une ambassade ou à un consulat de Islande avec le passeport et une photo. A remplir en CARACTERES D'IMPRIMERIE.

UPPLÝSINGAR UM UMSÆKJANDA • INFORMATION ABOUT THE APPLICANT • INFORMATIONS SUR LE DEMANDEUR

Eftirnafn • Surname • Nom de famille	Pyrrum eftirnafn • Former surname • Nom de famille antérieur
For nafn • First and middle names • Prénoms	Fæðingardagur: dagur, mána, ár • Date, month and year of birth • Date, mois, année de naissance
Þjóðerni • Nationality • Nationalité	Pyrrum þjóðerni • Former nationality • Nationalité antérieure
Fæðingarstaður • Place of birth • Lieu de naissance	Kyn • Sex • Sexe Maður • Man • Masculin <input type="checkbox"/> Kona • Woman • Féminin <input type="checkbox"/>

Vinnuveitandi/ skóli, nafn, heimilisfang, símanúmer Employer/ school, name, address and telephone no. Employeur/ école, nom, adresse et n° de téléphone.	Staða • Occupation • Profession
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Hjúskaparstaða • Marital status • Etat civil	Ógift(ur) • Single • Célibataire <input type="checkbox"/>	Gift(ur) • Married • Marié(e) <input type="checkbox"/>
	Skilin • Divorced • Divorcé(e) <input type="checkbox"/>	Eldja/ Eldkill • Widow/ Widower • Veuve/ Veuf <input type="checkbox"/>
Núverandi lögheimili • Present permanent address • Résidence permanente actuelle		
Nafn maka • Name of spouse • Nom du/de la conjoint(e)		
Fæðingardagur maka • Date of birth of spouse • Date de naissance		
Þjóðerni • Nationality • Nationalité		

TILGANGUR FERÐAR • PURPOSE OF JOURNEY • BUT DU VOYAGE

Viðskiptaferð • Business trip • Visite d'affaires <input type="checkbox"/>	Fjölskyldubeiðni • Visit to family • Visite de famille <input type="checkbox"/>	Tilgreinið fjölskyldutengsl • Indicate family relationship • Indiquer les relations de famille
Ferðamaður • Visit as a tourist • Tourisme <input type="checkbox"/>	Annad • Other • Autre <input type="checkbox"/>	Tilgreinið hvað • Indicate what • En indiquer la nature

TENGLS Á ÍSLANDI • REFERENCES IN ICELAND • REFERENCES EN ISLANDE

Nafn • Name • Nom	Heimilisfang • Address • Adresse	Sími • Telephone No. • N° de téléphone
Nafn • Name • Nom	Heimilisfang • Address • Adresse	Sími • Telephone No. • N° de téléphone
Ástíðni komudagur til Íslands • Expected day of arrival in Iceland • Date approximative de l'arrivée en Islande	Ástíðni dvalartími á Íslandi • Planned period of stay in Iceland • Durée prévue du séjour en Islande	Til hvaða lands hyggst þú fara næst • What country do you expect to go to after your stay in Iceland • Dans quel pays comptez-vous aller après le séjour en Islande

Heimilisfang á Íslandi • Address in Iceland • Adresse en Islande

Hvernig munt þú fjármagna ferðina og dvölinu • How are your journey and stay to be financed • Comment seront financés vos voyage et séjour

Hve margar ferðir er óskað eftir að fá inn í landið • How many times would you like to enter the country • Combien de fois désirez-vous entrer en Islande

UPPLÝSINGAR UM VEGABRÉF • INFORMATION ABOUT PASSPORT • INFORMATIONS SUR LE PASSEPORT

Tegund ferðaskilríkis • Type of travel document • Titre de voyage <input type="checkbox"/> Almennt vegabréf • National passport • Passeport national	Annad, hvæð • Other/ state which • Autre/ lequel <input type="checkbox"/>
Númer vegabréfis • No. of Passport • Numéro du passeport	Útgáfudagur • Date of issue • Délivré le
Útgefið af hverjum, land • Issuing authority, country • Autorité ayant délivré le passeport, pays	Gildistími • Valid until • Valable jusqu' au
Hefur þú áður sótt um áritun <input type="checkbox"/> eða dvalarleyfi <input type="checkbox"/> á Íslandi Have you previously applied for visa <input type="checkbox"/> residence permit <input type="checkbox"/> in Iceland Avez-vous précédemment demandé le visa d'entrée <input type="checkbox"/> ou le permis de séjour <input type="checkbox"/> en Islande	Hvenær • State when • Quand
Hefur þú búið í meira en 6 mánuði í öðru landi en heimalandi <input type="checkbox"/> Have you lived for more than six months in a country other than your home country <input type="checkbox"/> Avez-vous séjourné plus de 6 mois dans un pays autre que votre pays d'origine <input type="checkbox"/>	Lönd • Countries • Pays Tímabil • Period of stay • Durée
Hefur þú vegabréfáritun/ dvalarleyfi í öðrum löndum <input type="checkbox"/> Hvaða: Do you hold a visa/ residence permit in other countries <input type="checkbox"/> State which: Avez-vous obtenu le visa/ l'autorisation de séjour pour d'autres pays <input type="checkbox"/> Indiquer lesquels:	Lönd • Countries • Pays Gildistími • Valid until • Valable jusqu'au

UPPLÝSINGAR UM BÖRN SEM FERÐAST MEB UMSÆKJANDA • INFORMATION ABOUT CHILDREN ACCOMPANYING YOU • INFORMATIONS SUR LES ENFANTS ACCOMPAGNANT LE DEMANDEUR

Börn sem ferðast með umsækjanda Children accompanying you Enfants accompagnant le demandeur	Nafn • Name • Nom	Fæðingardagur: dagur, mána, ár • Date, month and year of birth • Date, mois et année de naissance	kyn sex sexe
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Yfirtýsing um samþykki og undirskrift
Ég, undirritað/aður, ábyrgist hér með, að viðlagðri refsibýrgð, að þau svör sem ég hef veitt við ofangreindum spurningum eru tæmandi og rétt. Einnfremur samþykki ég að ofangreindar upplýsingar verði veittar til annarra opinberra aðila, lönskra og erlendra, þ.m. lögreglu, við meðhöndlun umsóknar minnar og sthugun á persónulegum högum, afbrotafæri og fjölskyldutengslum.

Declaration of consent and signature
I, the undersigned, do hereby certify, under penalty of the law, that the statements made by me in reply to the foregoing questions are true, complete and correct. At the same time I consent to inquiries being made with other Icelandic and foreign authorities, including the police, for the purpose of considering my application, concerning my private matters, any previous convictions and my family affiliation.

Déclaration de consentement et signature
Je, soussigné(e) déclare, sous la responsabilité pénale, que les renseignements ci-dessus sont vrais et complets. Je vous donne en même temps l'autorisation de prendre – en vue du traitement de ma demande – des renseignements sur mes affaires strictement personnelles, notamment des renseignements sur mon casier judiciaire et mes liens de famille, auprès des autres autorités islande et des autorités étrangères, y compris la police.

Dagseting og staður • Date and place • Date et lieu	Undirskrift umsækjanda • Applicant's personal signature • Signature personnelle du demandeur
búsetur hjá • c/o • chez	Sími • Telephone No. • N° de téléphone
Heimilisfang • Address • Adresse	Póstfang/ staður • Postal code, city/ town • Code postal, ville

FYRIR SENDIRÁÐ/ RÆÐISMENN • FOR USE OF EMBASSY/ CONSULATE • RESERVE A L'AMBASSADE/ AU CONSULAT

Staðfest er að upplýsingar sem veittar hafa verið eru réttar og að vegabréf eigi við umsækjanda. já/ yes nei/ no
The information given about names and passport is in conformity with identification produced.

Hefur yfirvöldum verið send beiðni? Has authority been requested? já/ yes nei/ no

Hefur borist svar? Has a telex/ fax/ mail message been submitted? já/ yes nei/ no

Númer áritunar/ Sticker No.	Stimpill sendiráðs, ræðismanns/ Stamp of issuing embassy, consulate
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