

A	pplication fo	FOTO 葡萄子 2010.4			
1. Surname (Family name) ((x)				FOR OFFICIAL USE ONLY
ZHANG					
2. Surname at birth (Forme	r family name(s)) (x)				Date of application:
3. First name(s) (Given nam	ne(s)) (x) XIAOMII	NG			Visa application number:
4. Date of birth (day-mounth-		ONGQING		nationality JA at birth, if different:	Application lodge at □ Embassy/consulate □ CAC □ em Prestadores de serviços
15-04-1971	CHINA	CHINA		IINESE	□ em Intermediários comerciais □ na fronteira
8. Sex Male Feminino Single Married Separated Divorced Widow(er) Other (please specify) 10. In the case of minors: Surname, first name, address (if different from apllicant's) and nationality of					□ Other
parental authority/legal guardian 11. Nacional identify number, where apllicable 510222197104150331					Supporting documents: Travel document Means of subsistence Invitation Means of transport TMI Other:
12. Type of travel document: □ Ordinary passport □ Diplomatic passport □ Service passport □ Official passport □ Special passport □ Other travel document (please specify): PASSPORT FOR PUBLIC AFFAIRS					Visa decision: □ Refused □ Issued: □ A □ C □ LVT
13. Number of travel document	14. Date of issue	15. Valid until	16. Iss	ued by	□ Valid: From
PE0222417	25-07-2013	25-07-2018	8 MF	A	Until
17. Applican'ts home addres	ss and e-mail address		Telephone n	number(s)	Number of entries:
ROOM410, LANE358, NO.568 YONGPING ROAD, SHANGHAI 13388888852					□ 1 □ 2 □ Multiple
ZHANGXM@SJTU.EDU.C 18. Residence in a country of Não Yes. Residence permit or ec * 19. Current ocupation	ther than the country of			Valid until	Number of days:

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	ne number. For students, name and address of ONG UNIVERSITY UAN ROAD 34206748	
21. Main purpose(s) of the journey:		
□ Tourism □ Business □ Visiting family or friends		
☐ Medical reasons ☐ Study ☐ Transit ☐ Airp	ort transit	
22. Member State(s) of destination	23. Member State of first entry	
PORTUGAL	HOLLAND	
24. Number of entries requested	25. Duration of the intended stay or transit	
□ Single entry □ Two entries □ Multiple entries	Indicate number of days 7 DAYS	
*The field are wheel with the shall not be filled in but for	mily members of EU, EEA or CH citizens (spouse, child or dep	andent assendant)
	y members of EU, EEA or CH citizens shall present documents	
26. Schengen visas issued during the past three year		
□ No □ Yes. Date of validity from05:-05:-20.13. a		
27. Fingerprints collected previously for the purpose No Yes. Date, if known 28. Entry permit for the final country of destination		
Issued byvalid fr 29. Intended date of arrival in the Schengen area 05-09-2015	30. Intended date of departure from the Schengen area 11-09-2015	
* 31. Surname and first name of the inviting person or temporary accommodation(s) in the Member Sta CARLOS GUEDES S		
Address and e-mail address of inviting person(s)/hotel(s)/temporary accommodation(s) HOTEL CASCAIS MIRAGEM, CASCAIS, PORTUGE. C.GUEDES.SOARES@CENTEC.TECNICO.ULIS		
*32. Name and address of inviting company/organiz CARLOS GUEDES SOARES	ation Telephone and telefax of comp./organization +351 218 417 957/607	
Surname, first name, address, telephone, telefax, an HOTEL CASCAIS MIRAGEM, CASCAIS, P C.GUEDES.SOARES@CENTEC.TECNICO		
*33. Cost of travelling and living during the applica	nt's stay is covered	
□ by the applicant himself/herself	□ by a sponsor (host, company, organization), please specify □ referred to in field 31 or 32	
Means of support	□ others (please specify):	
□ Cash	Means of support	
□ Traveller's cheques □ Credit card	□ Cash	
☐ Prepaid accommodation	☐ Accommodation provided	
□ Prepaid transport	☐ All expenses covered during the stay ☐ Prepaid transport	
□ Other (pls. specify):	Other (pls. specify):	ay'm is programmed

34. Personal data of teh family mer	nber who is an EU, EEA	or CH citizen
Surname	Firs	et name(s)
Date of birth	Nationality	Number of travel document or ID card
35. Family relationship with na EU □ Spouse □ Child □Grand	, EEA or CH citizen child Dependent ascenda	nt
36. Place and date	37. Signature (for minors, sign	ature of parental authority/legal guardian):

I am aware that the visa fee is not refunded if the visa is refused.

Applicable in case a multiple-entry visa is applied for (cf. field No 24):

I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States.

I am aware of and consent to the following: the collection of the data required by the application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the visa application; and my personal data concerning me which appear on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on my visa application.

Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the Visa Information System (VIS)¹ for a maximum period of five years, during which it will be accessibled to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Member States, immigration and asylum authorities in the Member State for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled, of identifying persons who do not or who no longer fulfil these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will be also available to designated authorities of the Member States and to Europol for the purpose of prevention, detection and investigation of terrorist offences and of other serious criminal offences. The authority of the Member State responsible for processing the data is: [(...)]

I am awarethat i have the right to obtain in any of the Member States notification of the data relating to me recorded in the VIS and of the Member State Which transmitted the data, and to request that data relating to me which are inaccurate be corrected and that data relating to me processed unlawfully be deleted. At my express request, the authority examining my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have them corrected or deleted, including the related remedies according to the national law of the State concerned. The national supervisory authority of that Member State [contact details] will hear claims concerning the protection of personal data.

I declare that to the best of my knowledge all particulars supplied by me are 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 the law of the Member State which deals with the application.

I undertake to leave the territory of the Member States before the expiry of the visa, if granted. I have been informed that possession of a visa is only one of the prerequisites for entry into the European territory of the Member States. The mere fact that a visa has been granted to me does not mean that I will be entitled to compensation if I fail to comply with the revelant provisions of Article 5(1) of Regulation (EC) No 562/2006 (Schengen Borders Code) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Member States.

Signature (for minors, signature of parental authority/legal guardian):

In so far as the VIS is operational.