

MALTA VISA APPLICATION CENTRE**CHECKLIST FOR A SCHENGEN VISA FOR MEDICAL APPLICATIONS****NAME:****PURPOSE OF VISIT:****PASSPORT NO:****GROUP NO. (IF APPLICABLE)**

		Yes	No	Remarks
1.	One (1) completed and signed visa application form duly filled in English.			
2.	Valid passport with validity of at least three (3) months after expiry of the visa and should contain at least 2 blank pages.			
3.	One (1) photocopy of passport (empty pages need not be photocopied).			
4.	Two (2) passport-size photographs bearing a true image of the applicant.			
5.	National Identity Card			
6.	Hotel/Hospital confirmation/s for the whole journey within the Schengen Countries.			
7.	Confirmed air ticket/s. If ticket is presented, a copy is retained.			
8.	Proof of a valid Schengen-compatible health insurance policy, either individual or group, with a minimum cover of 30,000 Euro.			
9.	Purpose of Visit: A statement from Maltese Authorities or Statement by a Maltese medical organization in Malta or Statement by a Medical Doctor certifying that applicant is to undergo medical treatment in Malta			
10.	Proof of sufficient and regular personal financial means (recent salary slips or bank statements or bank voucher for purchased currency or statement of available credit on credit card).			
11.	Proof of Employment: Letter from employer indicating name, address, telephone number of the employer, position of applicant, tenure duration, salary and confirm that the			

	applicant will resume duty on his return. The Embassy may insist that the letter be stamped by the local Chamber of Commerce.			
12.	FOR MINORS: Birth certification of minor			
	Authorization of both Parents or Legal Guardian			
	Copy of Passport Data Page of both Parent or Legal Guardian			
	In case of guardianship, documentary proof of status			
13.	NON-GCC/YEMEN CITIZEN: Valid Entry/Exit Visa or residence permit valid for 3 months after return. National Identity Card should be presented where applicable.			

Submission Officer to delete as appropriate:

- (a) The applicant has confirmed that he/she has no other supporting documents to submit.
- (b) The applicant has submitted the supporting documents above. I have advised him/her that failure to submit all necessary documents may result in the application being refused and visa fee is non-refundable. He/she has chosen to proceed with the application.

Submission Officer Signature

Applicant Signature

Date

Name of Accredited Travel Agent
(if application is being submitted by agent)