

APPLICATION FOR CROATIAN VISA

This application form is free

The fields number 21, 22, 30 and 32 marked with * shall not be filled in by family members of EU, EEA and CH citizens Fields 1 - 3 shall be filled in accordance with the data in the travel document

| 1. Surname(s) / Family na | lsključivo za službenu uporabu | | | | | |
|---|--|----------------|--|---|--|--|
| 2. Surname (s) at birth (fo | Datum podnošenja zahtjeva: | | | | | |
| 3. First name(s): | Broj zahtjeva: | | | | | |
| 4. Date of birth (day-month-year): | | | 7. Current nationality: Nationality at birth, if different: Other nationalities: | | | |
| 10. If the application is | Married | | | Granični prijelaz (naziv): Ostalo Com Zahtjev obradio/obradila: | | |
| 11. National identity numbers 12. Type of travel documers Ordinary passport Other travel document 13. Number of travel document | Priložena dokumentacija: Putna isprava Sredstva za uzdržavanje Poziv Prijevozno sredstvo Putno zdravstveno osiguranje Ostalo | | | | | |
| 17. Personal data of the fa Surname(s) / Family name Date of birth (day-month-year): | amily member who is an EU, EB e(s): Nationality: | First name(s): | / | | | |

| 18. Family relationship with an EU, EEA or CH citizen (if applicable): | | | Dva | |
|--|--|-----------|-----|--|
| spouse Child Iifetime partnership C grandchild | d dependent direct relatives in the ascending line | Broj dana | | |
| ☐ other: | | | | |
| 19. Applicant's home address, e-mail address: | • | | | |
| 20. Residence in a country other than the country of current nationality □ No | / | | | |
| Yes. Residence permit or equivalent: number: | | | | |
| *21. Current occupation: | | | | |
| *22. Employer and employer's address and telephone number. For students, name and address of educational establishment ^(*) : | | | | |
| | | | | |
| 23. Purpose(s) of travel: | | | | |
| ☐ Tourism ☐ Business | Cultural Sports | | | |
| Official visit Medical reasons Study Airport Other (please specify): | | | | |
| | | | | |
| 24. Additional information on purpose of travel:: | | | | |
| | | | | |
| 25. Country of final destination (and other country of intended journey, if applicable) | 26. Border of first entry | | | |
| 27. Number of entry requested: | | | | |
| Single entry Two entries Multiple entries | | | | |
| Intended date of arrival in the Republic of Croatia (first visit, in case of two or multiple entries) | Intended date of departure from the Republic of Croatia (first visit, in case of two or multiple entries): | | | |
| 28. Fingerprints collected previously for the purpose of visa application | : | | | |
| □ No | | | | |
| Yes. Date (if known): Visa sticker number (if known): | | | | |
| 29. Entry permit for the final country of destination (if applicable) | | | | |
| Issued by: Valid from: *30. Surname and first name of the inviting person(s) in the Republic of | Until: | | | |
| *30. Surname and first name of the inviting person(s) in the Republic of Croatia. If not applicable, name of hotel(s) or temporary accomodation(s) in the Republic of Croatia: | | | | |
| Address and e-mail address from the inviting person(s) / hotel(s) / temporary accommodation(s): | Telephone number: | | | |
| | | I | | |

| 31. Name and address of inviting company/organisation | on: | | |
|--|------|---|---|
| Surname, first name, address, telephone and e-mail ac contact person in company/organisation *32. Cost of travelling and living during the stay is cover | | | Telephone number of company/organisation: |
| the applicant himself/herself Means of support Cash Traveller's cheques Credit card(s) Pre-paid accommodation Pre-paid transport Other (please specify) | Mean | please sp referred to other (please | to in field 31 / 32. ease specify): prt:: odation provided uses covered during the stay |

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. 27):

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

I am aware of and consent to the following: the collection of the data required by this 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 any 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 Republic of Croatia 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 of the Republic of Croatia (HVIS) for a maximum period of five years. During that time all data will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Republic of Croatia, immigration and asylum authorities in the Republic of Croatia for the purposes of verifying whether the conditions for the legal entry into, stay, and residence on the territory of the Republic of Croatia 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 also be available to designated authorities of the Republic of Croatia and to Europol for the purpose of prevention, detection and investigation of terrorist offences and other serious criminal offences. The authority responsible for processing the data is the Ministry for Foreign and European Affairs of the Republic of Croatia.

I am aware that I have the right to obtain notification of the data relating to me recorded in the HVIS 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, correct or delete if

inaccurate or illegally processed, any personal data concerning me in HVIS, as well as of the legal remedies according to the law. Claims concerning personal data protection are dealt by the Croatian Personal Data Protection Agency (address: Selska cesta 136, 10 000 Zagreb, Croatia, telephone: 00385 1 4609-000, telefax; 00385 1 4609-099, email address: azpo@azop.hr).

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 Republic of Croatia.

I undertake to leave the territory of the Republic of Croatia 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 Republic of Croatia. 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 relevant provisions of the Aliens Act of the Republic of Croatia (Croatian Official Gazette, No. 133/20) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the territory of the Republic of Croatia.

| Signature (for minors and persons deprived of legal capacity, signature of a legal guardian) |
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