



# APPLICATION FOR CROATIAN VISA

This application form is free

1. Surname(s) / Family name(s) <sup>(x)</sup>				<b>Isključivo za službenu uporabu</b>	
2. Surname(s) at birth <sup>(x)</sup>				Datum podnošenja zahtjeva	
3. First name(s) <sup>(x)</sup>				Broj zahtjeva u HVIS-u	
4. Date of birth (day-month-year)		5. Place of birth		7. Current nationality	
		6. Country of birth		Nationality at birth, if different	
8. Sex		9. Marital status			
<input type="checkbox"/> Male		<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er)			
<input type="checkbox"/> Female		<input type="checkbox"/> Other (please specify)			
10. If the application is lodged by a legal guardian: surname(s), name(s), address (if different from applicant's) and nationality of a legal guardian				Zahtjev podnesen u	
				<input type="checkbox"/> DM/KU	
				<input type="checkbox"/> Zajednički centar za podnošenje zahtjeva	
				<input type="checkbox"/> Pružatelj usluga	
				<input type="checkbox"/> Komercijalni posrednik	
				<input type="checkbox"/> Granični prijelaz	
				Naziv	
				<input type="checkbox"/> Ostalo	
11. National identity number (where applicable)				Zahtjev obradio/obradila	
12. Type of travel document					
<input type="checkbox"/> Ordinary passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Special passport					
<input type="checkbox"/> Other travel document (please specify)					
13. Number of travel document		14. Date of issue		15. Valid until	
				16. Issued by	
17. Applicant's home address, e-mail address				Telephone number(s)	
18. Residence in a country other than the country of current nationality					
<input type="checkbox"/> No					
<input type="checkbox"/> Yes. Residence permit or equivalent					
				No Valid until	
*19. Current occupation					
*20. Employer and employer's address and telephone number. For students, name and address of educational establishment <sup>(*)</sup>					
21. Main purpose of travel					
<input type="checkbox"/> Tourism <input type="checkbox"/> Business <input type="checkbox"/> Visiting friends/family <input type="checkbox"/> Cultural <input type="checkbox"/> Sports					
<input type="checkbox"/> Official visit <input type="checkbox"/> Medical reasons <input type="checkbox"/> Study <input type="checkbox"/> Transit <input type="checkbox"/> Airport transit					
<input type="checkbox"/> Other (please specify)					
Isključivo za službenu uporabu					
Datum podnošenja zahtjeva					
Broj zahtjeva u HVIS-u					
Zahtjev podnesen u					
<input type="checkbox"/> DM/KU					
<input type="checkbox"/> Zajednički centar za podnošenje zahtjeva					
<input type="checkbox"/> Pružatelj usluga					
<input type="checkbox"/> Komercijalni posrednik					
<input type="checkbox"/> Granični prijelaz					
Naziv					
<input type="checkbox"/> Ostalo					
Zahtjev obradio/obradila					
Priložena dokumentacija					
<input type="checkbox"/> Putna isprava					
<input type="checkbox"/> Sredstva za uzdržavanje					
<input type="checkbox"/> Poziv					
<input type="checkbox"/> Prijevozno sredstvo					
<input type="checkbox"/> Putno zdravstveno osiguranje					
<input type="checkbox"/> Ostalo					
Odluka o vizi					
<input type="checkbox"/> Odbijena					
<input type="checkbox"/> Izdana					
<input type="checkbox"/> A <input type="checkbox"/> C					
Vrijedi					
od .....					
do .....					
Broj ulazaka					
<input type="checkbox"/> Jedan <input type="checkbox"/> Dva					
<input type="checkbox"/> Više					
Broj dana					

(x) Fields 1 – 3 shall be filled in accordance with the data in the travel document.

22. Country of final destination		23. Border of first entry	
24. Number of entry requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries		25. Duration of the intended stay or transit (indicate number of days)	
26. Visa(s) issued during past three years <input type="checkbox"/> No <input type="checkbox"/> Yes. Country and validity:			
Country	Valid from	until	
Country	Valid from	until	
Country	Valid from	until	
27. Fingerprints collected previously for the purpose of visa application			
<input type="checkbox"/> No		<input type="checkbox"/> Yes. Date (if known)	
28. Entry permit for the final country of destination, where applicable			
Issued by		Valid from	until
29. Intended date of arrival in the Republic of Croatia		30. Intended date of departure from the Republic of Croatia	
*31. 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 and telefax	
*32. Name and address of inviting company/organisation		Telephone and telefax	
Surname, first name, address, telephone, telefax and e-mail address of a contact person in company/organisation			
*33. Cost of travelling and living during the stay is covered by			
<input type="checkbox"/> the applicant himself/herself  Means of support <input type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input type="checkbox"/> Credit card(s) <input type="checkbox"/> Prepaid accommodation <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify)		<input type="checkbox"/> a host / company /organisation (please specify) <input type="checkbox"/> referred to in field 31 / 32 ..... <input type="checkbox"/> other (please specify) .....  Means of support <input type="checkbox"/> Cash <input type="checkbox"/> Accommodation provided <input type="checkbox"/> All expenses covered during the stay <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify)	

(\*The fields marked with \* shall not be filled in by family members of EU, EEA and CH citizens (spouse, child, or dependent ascendant) while exercising their right of free movement. Family members of EU, EEA or CH citizens shall present documents to prove this relationship and fill in fields number 34 and 35.

