



Protocolo \_\_\_\_\_

Visto \_\_\_\_\_

**INSTRUCTIONS**

- ♦ TYPE or WRITE IN BLOCK LETTERS, IN BLUE INK ONLY.
- ♦ Answer all questions (1-26) thoroughly and accurately. If a question does not apply, please type N/A.
- ♦ Only Applicants must fill, sign and date the form .
- ♦ Incomplete forms will be returned.

**A - DADOS PESSOAIS (PERSONAL INFORMATION)**

01 - Name (First/Middle/Family Name as on passport)			<b>Paste</b>  <b>5x 4 cm</b>  <b>Photo</b>  (Not more than six months old and with a clear background)  <b>Here</b>
02 - Place of Birth (city/state/country)		03 - Date of birth Day      Month      Year	
04 - Nationality	05 - Sex (M/F)	06 - Marital Status (Single/Married/Divorced)	
07 - Passport No.	08 - Issuing Country	09 -Passport Expiry Date (D/M/Y)	
10 - Parent's Name and Nationality (No abbreviations)			
Father's: _____		Nationality _____	
Mother's: _____		Nationality _____	
11 - Residential Address		12 - Telephone no. ( country code +city code+ telephone no. )	13 - Profession
14 - Business Address		15 - Telephone no. ( country code +city code+ telephone no. )	16 - Employer
17 - Job Position or Title		18 - E-mail	
Draft Details (Bank, Draft No, Date, Amount)			

**PARA USO OFICIAL (FOR OFFICIAL USE ONLY)**

A - Consulta à SERE OF <input type="checkbox"/> TEL <input type="checkbox"/> No. _____		B - Autorização da SERE DESP <input type="checkbox"/> DESPTEL <input type="checkbox"/> No. _____		C - Tipo do Visto _____	
D - <input type="checkbox"/> Concessão <input type="checkbox"/> Denegação <input type="checkbox"/> Renovação		E - Entradas <input type="checkbox"/> Uma <input type="checkbox"/> Múltiplas		F - Prazo de Entrada _____ anos/dias	
G - Data ____/____/____		H - Observações			
I - Assinaturas					
				Funcionário _____ Chefia _____	

**19 - Purpose of trip (check one item that is the most applicable to the circumstances of your trip, Specify / Underline)**

- In Brazil - engaged in services of temporary or permanent nature, including in-field services under contract and/or intra-company activities such as project management, technical support, training, auditing/accounting in Brazil.
  - Headquarters-based business development activities, including negotiating contracts, executive meetings, marketing assessment, specifying orders in contracts, customer relations related activities, performance assessment, establishing framework for doing business in Brazil.
  - Import/Export business.
  - Work on offshore platform/ship.
  - Work under an employment contract with a company/organization in Brazil.
  - Attend conference, seminar or workshop (attendee? Paid/unpaid speaker? Trainer? Name event sponsor).
  - Professional training as an intern.
  - Provide religious or missionary services and/or assistance.
  - Provide community and/or medical services.
  - Attend school or pursue studies.
  - Conduct research or pursue scientific-technologic activities under an international cooperation program.
  - Pursue professional studies/research/teaching and/or pursue scientific/technologic activities at an university, research or similar organization (employment contract? Short term pro-labore? Research scholarship?)
  - Participation in athletic or performing arts events (paid/unpaid participation?)
  - Journalism activities and/or film making.
  - Official government mission/business.
  - Visit friend(s) and/or relatives (inform below relationship; provide name and address on item 20).
  - Tourism (inform below location, nature of trip, etc.)
  - Others: \_\_\_\_\_
- Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**20 - Name and address of person, institution or company where you can be contacted in Brazil**

<b>21 - Address while in Brazil</b>	<b>22 - Telephone #</b>
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<b>23 - Place and date of arrival</b>	<b>24 - Destination</b>	<b>25 - Duration of intended stay (in days or years)</b>
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**26 - Have you ever been to Brazil?**

Yes       No

If yes, inform when, place and duration of stay

**B - TERMO DE RESPONSABILIDADE (FORMAL STATEMENT TO BE FILLED AND SIGNED BY APPLICANT ONLY)**

**27 - I declare that the above information is true and accurate. (I have also read the rules and regulations in force)**

Date

Name	Day	Month	Year	Signature
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