



VISA APPLICATION

I declare that all data given in this form is complete and true. 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 Russian law. I undertake to leave the territory of Russia upon the expiry of the visa If granted. I understand that possession of a visa does not entitle its bearer to enter Russia automatically. I will not seek compensation if I am refused to enter Russia.

**** - not to be filled by holders of diplomatic and official passports**

1. Nationality (if you formerly had USSR or Russian citizenship, please indicate when and why you lost it) AUSTRALIA	6. Purpose of visit TOURISM
2. Last name (as in passport) HOWARD	7. Category and type of visa COMMON TOURIST

3. First and middle names (as in passport) PAUL	8. Number of entries Single entry <input checked="" type="checkbox"/> Double entry <input type="checkbox"/> Multiple entry <input type="checkbox"/>
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4. Date of birth (dd/mm/yy) 01/01/1975	5. Sex M <input checked="" type="checkbox"/> F <input type="checkbox"/>	9. Date of entry in Russia 23/09/2015 (dd/mm/yy)	10. Date of departure from Russia 30/09/2015 (dd/mm/yy)
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11. Passport No ABC12345678	Date of issue (dd/mm/yy) 01/03/2012
Issued by AUSTRALIAN PASSPORT OFFICE DEP. OF FOREIGN AFFAIRS AND TRADE	Valid until (dd/mm/yy) 01/03/2022

12. Type of passport diplomatic <input type="checkbox"/> official <input type="checkbox"/> other <input type="checkbox"/> please specify	tourist <input checked="" type="checkbox"/>
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13. Russian institution or organization to be visited? (for tourists – name and reference number of the host tourist company, for businessmen – name of the host organization and town, for private persons – last name, first name, middle names and home address of the host) HOTELS PRO, 013725
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14. Itinerary (places of visit) MOSCOW, SAINT-PETERSBURG

**15. Do you have a medical insurance valid in Russia? yes <input checked="" type="checkbox"/> Please specify? YOUR INSURANCE COMPANY - CERTIFICATE NUMBER 123	no <input type="checkbox"/>
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16. Who will pay for your trip to and stay in Russia? Independently

17. Marital status married <input type="checkbox"/> single (never married) <input checked="" type="checkbox"/> divorced <input type="checkbox"/> separated <input type="checkbox"/> widowed <input type="checkbox"/>
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18. Spouse's full name (if divorced or separated, please indicate maiden name if applicable)	19. Spouse's date of birth (dd/mm/yy)
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20. Spouse's place of birth

**21. Your father's full name JOHN HOWARD	**22. Your mother's full name NICOLE GIBSON
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23. Have you ever been issued a Russian visa? (When and where?) NONE
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**24. Has your passport ever been lost or stolen? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>

**25. List all countries you have visited in the last ten years and indicate the year of visit NEW ZEALAND, 12/08/2013; JAPAN, 23/08/2014	**26. List all countries which have ever issued you a passport NONE
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**27. List your last two places of work, excluding the current one	
1. Name NONE Address NONE Your position NONE	Phone number NONE Your chief's surname NONE Dates of joining – dismissal NONE (mm/yy) NONE (mm/yy)
2. Name NONE Address NONE Your position NONE	Phone number NONE Your chief's surname NONE Dates of joining – dismissal NONE (mm/yy) NONE (mm/yy)

**** - not to be filled by holders of diplomatic and official passports**

****28. List all educational institutions you ever attended, except high schools**

1. Name THE UNIVERSITY OF SYDNEY	Address and phone number <small>SUITE 401, BIOMEDICAL BUILDING 1 CENTRAL AVENUE AUSTRALIAN TECHNOLOGY PARK EVELEIGH NSW 2015 TELEPHONE: + 61 2 8627 1000</small>
Course of study ENTER YOUR MAJOR	Dates of admission and graduation 01/2009 (mm/yy) 01/2014 (mm/yy)
2. Name NONE	Address and phone number NONE
Course of study NONE	Dates of admission and graduation NONE (mm/yy) NONE (mm/yy)

**29. List all professional, civil and charity organizations which you are / were a member of or cooperate / cooperated with NONE	**30. Do you have any specialized skills, training or experience related to fire-arms and explosives or to nuclear matters, biological or chemical substance? If yes, please specify NONE
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****31. Have you ever performed a military service? If yes, indicate the country, branch of service, rank, military occupation and dates of service**
NONE

****32. Have you ever been involved in an armed conflicts, either as a member of the military service or a victim? If yes, please specify**
NONE

33. IMPORTANT! EACH APPLICANT MUST READ AND GIVE ANSWERS TO THE FOLLOWING QUESTIONS
A visa may be refused to persons who are within specific categories defined by the law as inadmissible to Russia.

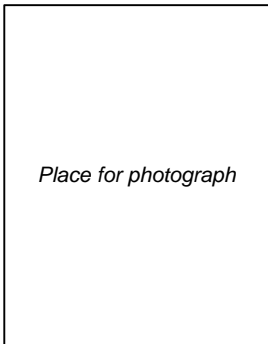
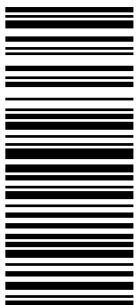
Have you ever been arrested or convicted for any offence? yes <input type="checkbox"/> When? (dd/mm/yy) _____ Where? _____ no <input checked="" type="checkbox"/>
Have you ever been afflicted with a communicable disease of public health significance or a dangerous physical or mental disorder? Have you ever been a drug abuser or a addict? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Have you ever been refused a Russian visa? yes <input type="checkbox"/> When? (dd/mm/yy) _____ Where? _____ no <input checked="" type="checkbox"/>
Has your Russian visa ever been canceled? yes <input type="checkbox"/> When? (dd/mm/yy) _____ Where? _____ no <input checked="" type="checkbox"/>
Have you ever tried to obtain or assisted others to obtain a Russian visa or enter Russia by providing misleading or false information? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Have you ever overstayed your Russian visa or stayed unlawfully in Russia? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Have you ever been deported from Russia? yes <input type="checkbox"/> When? (dd/mm/yy) _____ Where? _____ no <input checked="" type="checkbox"/>

Your answer yes in item 33 does not automatically signify ineligibility for a visa. In this case you may be required to personally appear before a consular officer.

34. Name, address and phone number of a person or hotel in Russia that you plan to stay with
NOVOTEL MOSCOW CENTER, NOVOSLOBODSKAYA STR 23, MOSCOW, 127055, +7 495 780-40-00; NOVOTEL SAINT PETERSBURG CENTER, UL. MAYAKOVSKOGO, 3A, ST PETERSBURG, 191025, +7 812 335-11-88

35. Has this application been completed personally by you? If no, indicate the person completing this application in item 36 yes no

36. Application completed: Surname, first name _____
Relationship to applicant _____
Applicant's address _____



I agree to my personal data on this application form being processed and communicated to the appropriate Russian authorities for the issue of a visa.

Date (dd/mm/yy), applicant's signature

37. Other names ever used (maiden name, pen-name, holy orders, et..) **NONE**

38. Your permanent address, phone and fax number, E-mail
COMPLET ADDRESS, 123456789, 1234567, howard1975@gmail.com

39. Place of birth (If born in Russia, please indicate when and what country you emigrated to)
SYDNEY

40. Place of work or study, present position (name, address, phone and fax numbers, E-mail)
AMP, MANAGER, COMPLET ADDRESS, 987654321, 98765432, howard75@amp.com.au

41. Are any of your relatives staying in Russia now? (full name, relation degree, date of birth, permanent address)
NONE