



## ROYAL NORWEGIAN EMBASSY

*Amman*

### ***Supplementary Questionnaire for Schengen Visa Applications to Norway, Denmark, Finland and Iceland***

THE FORM IS TO BE FILLED OUT IN **ENGLISH** AND SIGNED BY THE APPLICANT

#### QUESTIONNAIRE B – OTHER VISITS (FAMILY, FIANCÉ, FRIEND(S) OR CONTACTS)

##### **1. Information about the applicant**

Your name, surname:	
Date of birth:	
Citizenship:	

##### **2. Occupation/Profession/Financial means**

###### **2.1 What is your current occupational status?**

- ☐ Employee
 ☐ Unemployed
 ☐ Student
 ☐ Retired
 ☐ Farmer
 ☐ Housewife
 ☐ Other (please specify):

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###### **2.2 What is your monthly income?**

**Please specify amount in JOD, EUR or USD:**

Salary or professional income	
Pension	
Rental income	
Other income (support from spouse, parents, sponsor)	

###### **2.3 Do you have any property or other financial means (savings etc.)?**

- ☐ Yes
 ☐ No

**If yes, please explain:**


#### 2.4 How do you plan to finance your trip?


#### 2.5 What do you plan to do after your trip?


### 3. Family status

#### 3.1 Family residence form.

Please fill out the residence of all your close family members: spouse/cohabitant/fiancée, all children, parents and all siblings. Both family members living in your country of origin or abroad must be filled out.

Name, surname	Place of residence (city, country)	Date of birth	Relation to the applicant

**3.2 Who do you live with?**


**4. Purpose of visit****4.1 Who are you going to visit?**

- |                                       |   |  |
|---------------------------------------|---|--|
| <input type="checkbox"/> Spouse       | <input type="checkbox"/> Fiancé         | <input type="checkbox"/> Boyfriend/Girlfriend    |
| <input type="checkbox"/> Mother       | <input type="checkbox"/> Sister/Brother | <input type="checkbox"/> Aunt/Uncle              |
| <input type="checkbox"/> Father       | <input type="checkbox"/> Grandparent/s  | <input type="checkbox"/> Niece/Nephew            |
| <input type="checkbox"/> Son/Daughter | <input type="checkbox"/> Friend         | <input type="checkbox"/> Other (please specify): |

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**4.2 Information about relative/sponsor who you are going to visit:**

Name, surname:	
Date of birth:	
Citizenship:	

**4.3 Where and with whom does the sponsor live?**


**4.4 Please describe when and how you met the sponsor, your relationship to the sponsor, and the contact that you have had with the sponsor.**


## 5. Accompanying persons

**Are you travelling with someone else?**

☐ Yes

☐ No

If yes, who are you travelling with?

Name, surname	Place of residence (city, country)	Date of birth	Relation to the applicant

## 6. Are you planning other visits to the Schengen area?

☐ Yes

☐ No

If yes, when and where are you planning to go and what is the purpose of the visit(s)?


## 7. Previous Schengen visas

**7.1 Have you had previous visits to the Schengen area?**

☐ Yes

☐ No

If yes, when and where was it, and what was the purpose of the visit?


**7.2 Have you ever been rejected a Schengen-visa before?**

☐ Yes

☐ No

If yes, when, where and why?


Date:	Place:	Signature (for minors: signature of the guardian):