

PERSONAL INFORMATION	
FAMILY NAME *	
MIDDLE NAME	
GIVEN NAME*	
OTHER NAMES	
NAMES AS WRITTEN IN NATIVE LANGUAGE*	
DATE OF BIRTH*	
GENDER*	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
PLACE OF BIRTH / COUNTRY OF BIRTH*	
CITY OF BIRTH*	
MARITAL STATUS*	<input type="checkbox"/> SINGLE <input type="checkbox"/> CIVIL PARTNERSHIP <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW <input type="checkbox"/> OTHER
NATIONALITY*	
FORMER NATIONALITY	
NATIONAL ID NUMBER*	
OTHER NATIONALITY	
ID NUMBER OF OTHER NATIONALITIES	
PASSPORT NUMBER OTHER NATIONALITIES	
OTHER PERMANENT RESIDENT COUNTRIES	
RESIDENCY PERMIT NUMBER*	
RESIDENCY PERMIT TYPE*	
CHINESE NATIONALITY	
CHINESE NAME	
FORMER CHINESE ID NUMBER	
NUMBER OF LAST CHINESE PASSPORT	
CURRENT PASSPORT TYPE*	<input type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> OFFICIAL

	<input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> SERVICE <input type="checkbox"/> SPECIAL <input type="checkbox"/> OTHER
ISSUING COUNTRY OR REGION*	
PLACE OF ISSUE*	
ISSUING AUTHORITY*	
TRAVEL DOCUMENT NUMBER*	
ISSUE DATE*	
EXPIRY DATE*	
HAVE YOU EVER LOST YOUR PASSPORT? HAS IT EVER BEEN STOLEN?	<input type="checkbox"/> YES <input type="checkbox"/> NO
WHEN DID IT HAPPEN?	/ /
ISSUING COUNTRY OF LOST/ STOLEN TRAVEL DOCUMENT	
WHERE DID YOU LOSE IT? WHERE WAS IT STOLEN?	
TYPE OF VISA REQUIRED*	
Tourism	<input type="checkbox"/> INDEPENDENT TOURIST <input type="checkbox"/> GROUP MEMBER
IF CHOSEN GROUP MEMBER PLEASE LIST TRAVEL AGENCY IN CHINA	
TRAVEL AGENCY LICENSE NUMBER	
Commercial trade activities	<input type="checkbox"/> TRADE <input type="checkbox"/> PARTECIPATION IN COMPETITIONS <input type="checkbox"/> OTHER COMMERCIAL ACTIVITIES
EXCHANGE VISIT, STUDY TOUR OR OTHER RELEVANT ACTIVITIES	<input type="checkbox"/> ACADEMIC EXCHANGES <input type="checkbox"/> CULTURAL EXCHANGES (NON PROFIT PERFORMANCE) <input type="checkbox"/> RELIGIOUS EXCHANGES <input type="checkbox"/> NGO ACTIVITIES <input type="checkbox"/> VOLUNTERING NO MORE THAN 90 DAYS <input type="checkbox"/> FOREIGN EXPERT WITH PRE APPROVEED LETTERS OF INVITATION <input type="checkbox"/> GEOGRAPHIC SURVEYING AND MAPPING ACTIVITIES
FAMILY MEMBER OR RELATIVE OF CHINESE CITIZEN OR	<input type="checkbox"/> FAMILY MEMBER OF CHINESE CITIZEN APPLYING FOR RESIDENCE IN CHINA FOR FAMILY REUNION

<p>FOREIGNER WITH PERMANENT RESIDENCE STATUS IN CHINA</p>	<ul style="list-style-type: none"> <input type="checkbox"/> FAMILY MEMBER OF FOREIGNER WITH PERMANENT RESIDENCE STATUS IN CHINA WHO IS APPLYING FOR RESIDENCE IN CHINA FOR A FAMILY <input type="checkbox"/> RESIDENCE VISA FOR CHILD TO BE FPRSTERED IN CHINA <input type="checkbox"/> RELATIVE OF CHINESE CITITZEN LIVING IN CHINA APPLYING FOR A VISDA FOR VISIT NO MORE THAN 180 DAYS <input type="checkbox"/> RELATIVE OF FOREIGNER WITH PERMANENET RESIDENCE STATUS IN CHINA APPLYING FOR A CHINA VISA FOR VISIT NO LONGER THAN 180 DAYS
<p>PLEASE PROVIDE NAME OF THE PERSON RELATIONSHIP TO YOU PERMANENT RESIDENCE PERMIT OR ID NUMBER</p>	
<p>FAMILY MEMBER OF FORESEIGNER STAYING OR RESIDING I CHINA OR PERSON WHO NEEDS TO COME TO CHINA FOR PERSONAL MATTERS</p>	<ul style="list-style-type: none"> <input type="checkbox"/> SPOUSE, PARENT, CHILD UNDER THE AGE OF 18 OR PARENT I LAW OF FOREIGNER RESIDING IN CHINA FOR WORK / STUDY / OR OTHER PURPOSES WHO VISITI CHINA FO RMORE THAN 180 DAYS <input type="checkbox"/> PERSON WHO NEEDS TO RESIDE I CHINA FOR OTHER PERSONAL MATTERS <input type="checkbox"/> FAMILY MEMBER OF FOREIGNER STAYING OR RESIDING IN CHINA FOR WORK, STUDY OR OTHER PURPOSES WHO VISIT CHINA FOR NO MORE THAN 180 DAYS <input type="checkbox"/> APPLYING FOR A VISA TO STAY IN CHINA FOR OTHER PERSONAL MATTERS SUCH AS HANDLING LITIGATION , INHERITANCE OR REAL ESTATE OR MEDICAL TREATMENT
<p>PLEASE PROVIDE NAME OF PERSON RESIDING IN CHINA RELATIONSHIP TO YOU RESIDENCE PERMIT NUMBER</p> <p>PROVIDE REASON FOR RESIDENCE IN CHINA IF APPLICABLE</p>	
<p>WORK</p>	<ul style="list-style-type: none"> <input type="checkbox"/> FOREIGN EXPERT WORKING IN CHINA <input type="checkbox"/> CHIEF REPRESENTATIVE OR REPRESENTATIVE OF A FOREIGN COMPANY <input type="checkbox"/> OFFSHORE OIL OPERATIONS <input type="checkbox"/> VOLUNTEERING MORE THAN 90 DAYS <input type="checkbox"/> FOREIGNER WORKING IN CHINA WITH A WORK PERMIT ISSUED BY THE CHINESE GOVERNEMENT

STUDY	<input type="checkbox"/> LONG TERM STUDY (MORE THAN 90 DAYS) <input type="checkbox"/> SHORT TERM STUDY (LESS THAN 90 DAYS)
JOURNALIST	<input type="checkbox"/> FOREIGN JOURNALIST VISITING CHINA FOR SHORT TERM NEWS COVERAGE <input type="checkbox"/> RESIDENT FOREIGN JOURNALIST OF PERMANENT OFFICE OF A FOREIGN NEWS AGENCY IN CHINA
CREW MEMBER	<input type="checkbox"/> CREW MEMBER PERFORMING DUTIES ON BOARD OAN INTERNATIONAL TRAIN. <input type="checkbox"/> CREW MEMBER PERFORMING DUTIES ON BOARD AN INTERNATIONAL AIRCRAFT <input type="checkbox"/> CREW MEMBER PERFORMING FUTIES ON BOARD AN INTERNATIONAL VESSE OR ACCOMPANYING FAMILY MEMBER <input type="checkbox"/> VEHICLE DRIVER ENGAGED IN INTERNATIONAL TRANSPORTATION SERVICES
TRANSIT TRHOUGH CHINA	<input type="checkbox"/> .
PERMANENT RESIDENCE	PERSON COMING TO CHINA TO TAKE UP PERMANENET RESIDENCE
FOREIGNER OF HIGH TALENT OR SPECIALIST	FOREIGNER OF HIFH TALENT OR SPECIALIST NEEDED BY THE STATE PLEASE NAME OF THE TALENT RECRUITMENT PROGRAMME _____
DIPLOMATIC VISA	<input type="checkbox"/> HEAD OF STATE OR GOVERNEMENT, FOREIGN MINISTER OR OTHER OFFICAL WITH EQUIVALENT RANKL INVITED FOR AN OFFICIAL VISIT AN ACCOOMpanying SPOUSE AND OR CHILDERN UNDER THE AGE OF 18 <input type="checkbox"/> GOVERNEMNT OFFICIAL OR OFFICIAL OF INTERNATIONAL ORGANIZATION HOLDING A DIPLOMATIC PASSPORT OR OTHER CORRESPONDING TRAVEL DOCUMENT VISISTING CHINA FOR OFFICIAL PURPOSES AND ACCOMPANYING SPOUSE AND OR CHILDREN UNDER THE AGE OF 18 <input type="checkbox"/> DIPLOMATIC COURIER OR CONSULAR COURIER <input type="checkbox"/> OTHER PERSONNEL VISITING CHINA FOR DIPLOMATIC PURPOSES
OFFICIAL VISIT	<input type="checkbox"/> GOVERNEMENT OFFICIAL , OFFICIAL OF INTERNATIONAL ORGANIZATIONS HOLDING A SERVICE/OFFICIAL PASSPORT OR OTHER CORRESPONDING TRAVEL DOCUMENT VISITING CHINA FOR OFFICIAL PURPOSES AND ACCOMPANYING SPOUSE AND OR CHILDREAN UNDER THE AGE OF 18 <input type="checkbox"/> HOLDER OF A DIPLOMATIC SERVICE OFFICIAL PASSPORT VISISTING CHINA TO IMPLEMENTA PROGRAM OF EXCHANGE AND CO OPERATION ACCORDING TO RELEVANT AGREEMENTS BETWEEN CHINA AND OTHER COUNTRIES OR INTERNATIONAL ORGANIZATIONS AND

	<p>ACCOMPANYING SPOUSE AND CHILDREN UNDER 18</p> <p><input type="checkbox"/> MILITARY PERSONNEL INVITED TO IMPLEMENT MILITARY PROGRAMME OF EXCHANGE AND COOPERATION AND ACCOMPANYING SPOUSE AND CHILD UNDER THE AGE OF 18</p> <p><input type="checkbox"/> OTHER PERSONNEL VISITING CHINA FOR OFFICIAL PURPOSES</p>
MEMBER OF DIPLOMATIC MISSION , CONSULAR POST AND INTERNATIONAL ORGANIZATIONS AND THEIR ACCOMPANYING FAMILY MEMBERS	<p><input type="checkbox"/> MEMBER OF DIPLOMATIC MISSIONS, CONSULAR POSTS OR INTERNATIONAL ORGANIZATIONS IN CHINA</p> <p><input type="checkbox"/> SPOUSE OR DEPENDENT CHILDREN UNDER THE AGE OF 18 ACCOMPANYING THE MEMBER</p> <p><input type="checkbox"/> OTHER ACCOMPANYING RELATIVE OF THE MEMBER</p> <p><input type="checkbox"/> SPOUSE, CHILDREN UNDER THE AGE OF 18 OR OTHER RELATIVE VISITING MEMBER OF DIPLOMATIC MISSIONS, CONSULAR POST OR INTERNATIONAL ORGANIZATIONS FOR A SHORT VISIT</p>
<p>-PLEASE PROVIDE THE FOLLOWING INFORMATION.</p> <p>NAME OF THE MISSION</p> <p>IS IT A NEW JOB POSITION FOR THE ABOVE MENTIONED MISSION?</p> <p>NAME OF THE MEMBER OF DIPLOMATIC MISSION/ CONSULAR POSTS OR INTERNATIONAL ORGANIZATION</p>	
OTHER PURPOSES (PLEASE SPECIFY)	
SERVICE REQUIRED*	<p><input type="checkbox"/> EXPRESS (2 BUSINESS DAYS)</p> <p><input type="checkbox"/> STANDARD (3 BUSINESS DAYS)</p>
VISA SOUGHT DETAILS*	
VALIDITY OF VISA *	<p><input type="checkbox"/> 6 MONTHS</p> <p><input type="checkbox"/> 12 MONTHS</p>
MAXIMUM DURATION OF LONGEST STAY IN DAYS	
ENTRIES *	<p><input type="checkbox"/> SINGLE</p> <p><input type="checkbox"/> DOUBLE</p> <p><input type="checkbox"/> MULTIPLE</p>
WORK INFORMATION	

CURRENT OCCUPATION	<input type="checkbox"/> BUSINESS PERSON <input type="checkbox"/> COMPANY EMPLOYEE <input type="checkbox"/> ENTERTAINER <input type="checkbox"/> INDUSTRIAL / AGRICULTURAL WORKER <input type="checkbox"/> STUDENT <input type="checkbox"/> MEMBER OF PARLIAMENT <input type="checkbox"/> GOV OFFICIAL <input type="checkbox"/> NGO STAFF <input type="checkbox"/> MILITARY PERSONNEL <input type="checkbox"/> RELIGIOUS PERSONNEL <input type="checkbox"/> MEDIA REPRESENTATIVE <input type="checkbox"/> CREW MEMBER <input type="checkbox"/> SELF EMPLOYED <input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> RETIRED <input type="checkbox"/> OTHER
ANNUAL INCOME IN RMB / USA / EURO *	
WORK EXPERIENCE LIST IN REVERSE CHRONOLOGICAL ORDER *	NAME OF CURRENT EMPLOYER <hr/> FROM _____ TO _____ ADDRESS _____ <hr/> SUPERVISOR NAME AND PHONE NUMBER _____ _____ POSITION <hr/> DUTY _____ _____
	NAME OF LAST EMPLOYER <hr/> FROM _____ TO _____ ADDRESS _____ <hr/> SUPERVISOR NAME AND PHONE NUMBER _____ _____ POSITION <hr/> DUTY _____ _____

	<p>_____</p>
	<p>NAME OF PREVIOUS EMPLOYER</p> <hr/> <p>FROM _____</p> <p>TO _____</p> <p>ADDRESS _____</p> <hr/> <p>SUPERVISOR NAME AND PHONE NUMBER</p> <p>_____</p> <p>_____</p> <p>POSITION</p> <hr/> <p>DUTY</p> <p>_____</p>
<p>EDUCATION</p>	
<p>LANGUAGE SKILLS*</p>	<p> <input type="checkbox"/> NON SPEAKING <input type="checkbox"/> BASIC SPEAKER <input type="checkbox"/> CONVERSATIONAL LEVEL <input type="checkbox"/> FLUENT SPEAKING </p>
<p>EDUCATION SINCE HIGH SCHOOL LIST IN REVERSE CHRONOLOGICAL ORDER *</p>	<p>FROM _____</p> <p>TO _____</p> <p>NAME AND ADDRESS</p> <hr/> <hr/> <hr/> <p>DIPLOMA / DEGREE</p> <hr/> <hr/> <p>MAJOR</p> <hr/>
	<p>FROM _____</p> <p>TO _____</p> <p>NAME AND ADDRESS</p> <hr/>

	<hr/> <hr/> DIPLOMA / DEGREE <hr/> <hr/> MAJOR <hr/>
	FROM _____ TO _____ NAME AND ADDRESS <hr/> <hr/> <hr/> DIPLOMA / DEGREE <hr/> <hr/> MAJOR <hr/>
FAMILY INFORMATION *	
COUNTRY OF RESIDENCE FULL ADDRESS *	
PHONE NUMBER	
MOBILE NUMBER*	
EMAIL ADDRESS*	
FAMILY MEMBERS	
FAMILY MEMBERS	
SPOUSE FULL NAME*	
NATIONALITY*	
COUNTRY OF BIRTH*	

OCCUPATION*	
DATE OF BIRTH*	
ADDRESS*	
DOES HE / SHE LIVE IN CHINA?*	
PLEASE PROVIDE RESIDENCE PERMIT TYPE AND NUMBER	
FATHER FULL NAME*	
NATIONALITY*	
COUNTRY OF BIRTH*	
OCCUPATION*	
DATE OF BIRTH*	
ADDRESS*	
DOES HE LIVE IN CHINA?*	
PLEASE PROVIDE RESIDENCE PERMIT TYPE AND NUMBER	
MOTHER FULL NAME*	
NATIONALITY*	
COUNTRY OF BIRTH*	
OCCUPATION*	
DATE OF BIRTH*	
ADDRESS*	
DOES SHE LIVE IN CHINA?*	
PLEASE PROVIDE RESIDENCE PERMIT TYPE AND NUMBER	

CHILD 1 FULL NAME*	
NATIONALITY*	
OCCUPATION*	
DATE OF BIRTH*	
CHILD 2 FULL NAME	
NATIONALITY	
OCCUPATION	
DATE OF BIRTH	
CHILD 3 FULL NAME	
NATIONALITY	
OCCUPATION	
DATE OF BIRTH	
DO YOU HAVE ANY IMMEDIATE RELATIVES NOT INCLUDING PARENTS LIVING IN CHINA*	<input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF RELATIVE 1 RESIDENCE STATUS IN CHINA RELATIONSHIP TO YOU	
NAME OF RELATIVE 2 RESIDENCE STATUS IN CHINA RELATIONSHIP TO YOU	

INFORMATION ABOUT YOUR INTENDED TRIP*

DATE OF ARRIVAL *

ARRIVAL TRAIN / SHIP / FLIGHT
NUMBER *

CITY OF ARRIVAL *

COUNTY OF ARRIVAL *

DATE OF DEPARTURE *

DEPARTURE TRAIN / SHIP /
FLIGHT NUMBER *

CITY OF DEPARTURE *

ADDRESS OF STAY WHEN IN
COUNTRY *

DATE OF ARRIVAL *

DATE OF DEPARTURE *

INVITING PERSON OR
ORGANIZATION / HOTEL OR
TEMPORARY RESIDENCE IN
CHINA

NAME OR ORGANIZATION

RELATIONSHIP TO YOU

PHONE NUMBER

EMAIL ADDRESS

ADDRESS

**SERIAL NUMBER OF
INVITATION LETTER OF THE
AUTHORISED ORGIZATION**

EMERGENCY CONTACT *

FULL NAME *	
PHONENUMBER*	
EMAIL ADDRESS *	
ADDRESS *	
WHO WILL PAY FOR THIS TRAVEL *	<input type="checkbox"/> APPLICANT <input type="checkbox"/> OTHER
IF OTHER PLEASE SPECIFY NAME ADDRESS PHONE NUMBER RELATIONSHIP TO YOU	
IF ORGANIZATION PLEASE STATE NAME ADDRESS PHONE NUMBER RELATIONSHIP TO YOU	
DOMESTIC FOREIGN SPONSOR	
RELATIONSHIP TO YOU	
PHONE NUMBER	EMAILD ADDRESS
ADDRESS	
TRAVEL COMPANION IF SOMEONE IS TRAVELLING WITH YOU PLEASE STATE NAME GENDER DATE OF BIRTH WILL THE PERSON USE SAME PASSPORT PLEASE PROVIDE PASSPORT PHOTOGRAPH OF EVERY PERSON TRAVELLING WITH YOU	<input type="checkbox"/> <input type="checkbox"/> YES <input type="checkbox"/> NO

PREVIOUS TRAVEL INFORMATION *

<p>PREVIOUS TRAVEL TO CHINA IN THE PAST 3 YEARS.</p> <p>HAVE YOU VISITED CHINA IN THE PREVIOUS 3 YEARS? *</p>	<p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>
DATE OF ARRIVAL *	
DATE OF DEPARTURE *	
CITIES VISITED	
<p>HAVE YOU EVER BEEN ISSUES A CHINA VISA?</p>	<p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>
TYPE OF VISA *	
NUMBER OF VISA*	
PLACE OF ISSUE *	
DATE OF ISSUE *	
<p>HAVE YOU EVER BEEN FINGERPRINTED WHEN APPLYING FOR A CHINESE VISA *</p>	<p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>
DATE OF LAST FINGERPRINT SUBMISSION *	
<p>HAVE YOU EVER BEEN ISSUE WITH A PERMANENET RESIDENCE PERMIT FOR CHINA *</p>	<p>YES</p> <p>NO</p> <p>DATE OF ISSUE</p> <p>DATE OF EXPIRY</p> <p>RESIDENCE PERMIT NUMBER</p>
<p>HAVE YOU EVER LOST A CHINESE VISA?</p> <p>HAS IT EVER BEEN STOLEN FROM YOU?</p>	<p>YES</p> <p>NO</p> <p>DATE _____</p>
VALID VISAS	
<p>DO YOU HOLD A VALID VISA FOR ANY OTHER COUNTRY?</p>	<p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p> <p>NAME _____</p>
COUNTRES VISITED IN THE LAST 5 YEARS	

HAVE YOU EVER BEEN REFUSED A CHINA VISA	<input type="checkbox"/> YES <input type="checkbox"/> NO
HAS YOUR CHINESE VISA EVER BEEN CANCELLED? WHEN? WHY?	<input type="checkbox"/> YES <input type="checkbox"/> NO <hr/> <hr/> <hr/> <hr/>
HAVE YOU EVER ENTERED CHINA ILLEGALLY? OVERSTAYED? WORKED ILLEGALLY?	<input type="checkbox"/> YES <input type="checkbox"/> NO <hr/> <hr/> <hr/> <hr/> <hr/>
DO YOU HAVE ANY MENTAL DISORDER OR INFECTIOUS DISEASE?	<input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU EVER VISITED COUNTRIES OR TERRITORIES WHERE THERE IS AN EPIDEMIC IN THE LAST 30 DAYS?	<input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU EVER BEEN TRAINED OR DO YOU HAVE ANY SPECIAL SKILLS IN THE FIELD OF FIREARMS, EXPLOSIVES, NUCLEAR DEVICES, BIOLOGICAL OR CHEMICAL PRODUCTS?	
DO YOU OR HAVE YOU WORKED WITH THE MILITARY?	<input type="checkbox"/> YES <input type="checkbox"/> NO DATES OF SERVICE FROM _____ TO _____ BRANCH RANK COUNTRY OF SERVICE
HAVE YOU SERVED OR PARTICIPATED IN ANY PARAMILITARY ORGANIZATION, CIVILIL ARMED UNITS, GUERRILLA FORCES OR ARMED ORGANIZATIONS, OR BEEN ITRS MEMBER	<input type="checkbox"/> YES <input type="checkbox"/> NO
IS THERE ANYTHING ELSE YOU WANT TO DECLARE?	<hr/> <hr/> <hr/> <hr/>
