



DADOS PESSOAIS / PERSONAL INFORMATION			PROTOCOLO Nº
01 - NOME COMPLETO (FIRST/MIDDLE/FAMILY NAME)			VISTO Nº
02 - NASCIDO EM (cidade/estado/país) PLACE OF BIRTH (city/state/country)		03 - data de nascimento(dia/mês/ano) date of birth (day/month/year)	ATTACH 3 X 4 cm  PHOTO HERE
04 - NACIONALIDADE NATIONALITY	05 - SEXO SEX	06 - ESTADO CIVIL MARITAL STATUS	
07 - DOCUMENTO DE VIAGEM PASSPORT OR TRAVEL DOCUMENT	08 - PAÍS EXPEDIDOR ISSUING COUNTRY	09 - EXPIRAÇÃO (dia/mês/ano) EXPIRATION DATE (d/m/y)	
10 - NOME DOS PAIS / NAME OF PARENTS  do pai/father _____  da mãe/mother _____			
11 - ENDEREÇO RESIDENCIAL / HOME ADDRESS		12 - TELEFONE Nº TELEPHONE Nr	13 - PROFISSÃO PROFESSION
14 - ENDEREÇO PROFISSIONAL /BUSINESS ADDRESS		15 - TELEFONE Nº TELEPHONE Nr	16 - EMPREGADOR EMPLOYER
		17 - TÍTULO OU POSIÇÃO / TITLE OR JOB POSITION	
18 - ENDEREÇO ELETRÔNICO / E-MAIL ADDRESS			

**FAVOR PREENCHER À MÁQUINA OU EM LETRA DE FORMA. RESPONDER AOS ITENS 1 A 26 (FRENTE E VERSO) E ASSINAR. FORMULÁRIOS INCOMPLETOS SERÃO DEVOLVIDOS. PLEASE TYPE OR PRINT. ANSWER ITEMS 1 THROUGH 26 (FRONT AND OVERLEAF) AND SIGN. INCOMPLETE FORMS WILL BE RETURNED.**

PARA USO OFICIAL / FOR OFFICIAL USE ONLY			
A - Consulta à SERE _____ Nº. _____		B - Autorização da SERE _____ Nº. _____	
C - Tipo do Visto _____			
D - <input type="checkbox"/> Concessão <input type="checkbox"/> Denegação <input type="checkbox"/> Prorrogação	E - Entradas <input type="checkbox"/> Uma <input type="checkbox"/> Múltiplas	F - Prazo de Estada _____anos/dias	G - Data _____/_____/_____ dia mês ano
H - Observações		I - Assinaturas  Funcionário  Chefia	

**PERSONAL INFORMATION**

19 - Purpose of trip (check **ONE** item best applicable to the circumstances of your trip)

- Tourism or visit friends and relatives (no paid activities are allowed).
- Business development activities, negotiating contracts, executive meetings, marketing assessment, specifying orders in contracts, customer relations related activities, performance assessment, establishing framework for doing business in Brazil, etc.
- Import/Export business.
- Investment.
- In-country provision of 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.
- Work on offshore platform/ship.
- Work under an employment contract with a company/organization in Brazil.
- Transit through Brazil.
- Attend conference, seminar or workshop (please specify your position at the conference and the event sponsor).
- Participation in athletic or performing arts events (please specify if money will be involved and if spectators will pay for attending the event).
- Professional training as an intern.
- Studies/research/teaching and/or scientific/technologic activities at an university or research institute.
- Religious, missionary services or assistance.
- Adoption.
- Community or voluntary work.
- Student exchange program (please name the intervening entity).
- To attend a language course (please name the school).
- The trip includes visit to areas inhabited by indigenous population.
- Journalism activities or film making.
- Official mission.
- Permanent Visa, please specify if it is based on family reunion or working contract.
- Other purpose, please elaborate:

20 - NOME E ENDEREÇO DA PESSOA, ENTIDADE OU EMPRESA DE CONTATO NO BRASIL  
 NAME AND ADDRESS OF PERSON, INSTITUTION OR COMPANY WHERE YOU CAN BE CONTACTED IN BRAZIL

21 - ENDEREÇO NO BRASIL  
 ADDRESS IN BRAZIL

22 – TELEFONE Nº  
 TELEPHONE NO.

23 – LOCAL E DATA DE DESEMBARQUE  
 PLACE AND DATE OF ARRIVAL

24 – DESTINO  
 DESTINATION

25 – PERÍODO DA ESTADA  
 LENGTH OF INTENDED STAY

26 – JÁ ESTEVE NO BRASIL?  
 HAVE YOU EVER BEEN IN BRAZIL?       SIM YES       NÃO NO

EM CASO AFIRMATIVO, PERÍODO/LOCAL/DURAÇÃO DA ÚLTIMA ESTADA  
 IF YES, PLEASE INFORM PLACE AND TIMEFRAME

**B – DECLARAÇÃO / FORMAL STATEMENT**

27 – Declaro que as informações acima são verdadeiras.  
 I hereby declare that the above information is true and accurate.

Nome / Name

Data / Date

Assinatura / Signature

D/D	M/M	A/Y
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