

**VISA INFORMATION FORM**

NAME OF THE APPLICANT TO THE LDCs/SIDS :

COUNTRY:

Functional Title

Ministry /Government Office:

**The APPLICANT will need a Swiss/Shengen visa to participate in the programme: Yes / No**

If No: please explain and send a copy of the Visa

If Yes, please fill in the below :

Contact details of the applicant:

Email address (official)

Email address (private)

Mobile number: (+ country code,)

Passport number:

Diplomatic /Regular (please circle the appropriate response)

Passport issued on:

Date of expiration (passport MUST HAVE a 6-month validity AT THE TIME OF APPLICATION):

Contact details of the nearest Embassy that can deliver a Shengen Visa:

Country of the Embassy:

Location: city, country

Address Email:

It is the responsibility of the applicant to undertake all the necessary formalities to secure his/her visa. This form is mandatory and should be included in the application package.