



APPLICATION FORM / VISAS TEMPORALES

TYPE OF VISA: D-7 (Business Visa)

WHEN APPLYING YOU MUST SUBMIT (completed and signed application form, Letter of invitation from Cuban Company, Organization, or Institution, and passport. Fee: 80.00 Euros)

YOUR DETAILS (Detalles de la persona que solicita la visa):

NAME (nombre) : _____

LAST NAME (apellidos): _____

CITIZENSHIP / NATIONALITY (nacionalidad): _____ PASSPORT NUMBER (número pasaporte): _____

COUNTRY OF BIRTH (país nacimiento): _____ DATE OF BIRTH (fecha nacimiento): DAY ____ MONTH ____ YEAR ____

ADDRESS (Dirección): _____ TELEPHONE (teléfono): _____

CONTACT DETAILS:

YOUR ORGANIZATION, COMPANY OR INSTITUTION IN HOLLAND: _____

ADDRESS: _____ TELEPHONE: _____

PROFESSION: _____ POSITION: _____

PURPOSE OF VISIT: _____

CUBAN ORGANIZATION, COMPANY OR INSTITUTION THAT INVITES YOU: _____

ADDRESS: _____ TELEPHONE: (00537) _____

CONTACT PERSON IN CUBA: _____ POSITION: _____

HAVE YOU BEEN IN CUBA BEFORE: ____ IF YOU HAVE, DATE OF LAST ENTRY: ____ DAY ____ MONTH ____ YEAR

ABOUT THE TRIP:

BOARDING POINT TO CUBA (punto de embarque hacia Cuba): _____

DATE OF ENTRY TO CUBA: _____ DATE OF DEPARTURE FROM CUBA: _____ TOTAL LENGTH OF STAY: ____ DAYS

I DECLARE THAT MY ANSWERS IN THIS APPLICATION ARE TRUE:

DATE: _____ SIGNATURE: _____

PARA USO DEL CONSULADO	Visa número: _____	Fecha expedición: __/__/__
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