

Questionnaire concerning a person who wishes to visit you in Sweden

You have received a request from the Swedish Migration Agency to fill in this form because a person has applied to visit you. He or she has named you as referee.

We begin processing his or her application by asking you to answer the questions in this form and send it complete with attachments to the Migration Agency. Please use an extra piece of paper if necessary. If we do not receive your answer in time, or if it is incomplete, we might decide on the application from the documents we have.

You will find this form and more information at www.migrationsverket.se. Please complete the form on a computer if possible, as it makes it easier for us to process your application.

1. Your personal details (the person who lives in Sweden)

Surname (Family name)	First name(s)	
Date of birth/Personal ID No. (YYYYMMDD-NNNN)	Citizenship	
Address	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Daytime telephone number	Email address	

2. Details regarding your employment

Only applies if you are guarantor for the person's travel or upkeep.

Your profession or occupation	Your employer	
Other income (pension, maintenance, etc.)	Employed since	Annual income

3. The applicant (the person who wishes to visit you)

Surname (Family name)	First name(s)	
Previous surname(s)	Date of birth (YYYYMMDD)	
Citizenship	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Present place of residence and country	Case number	
Daytime telephone number	Email address	

4. Details of the visit

When and for how long will the applicant be visiting you in Sweden?
What is the purpose of the visit?
Where will the applicant be living during the visit?

Are any other persons applying for permits at the same time as the applicant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state name(s) and date(s) of birth		

5. Financial details relating to the visit

Who is paying for the journey to Sweden?	Who is paying the applicant's upkeep during the visit in Sweden?
	<input type="checkbox"/> The applicant <input type="checkbox"/> Me <input type="checkbox"/> Another person
If someone, other than you, is paying for upkeep during the visit in Sweden, state his or her name here	
<i>(He or she shall show proof of income, assets and any dependants he or she has to support. Salary and other income can be proven by e.g. witnessed copies of pay slips and bank account statements. The information should be included in the applicant's application but can also be included here.)</i>	

6. Your relationship with the applicant

Are you related to the applicant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state in what way		
If no, how do you know one another?		
How long have you known one another?		

7. Personal details of the applicant

Marital status	
<input type="checkbox"/> Unmarried <input type="checkbox"/> Married (Including registered partner) <input type="checkbox"/> Engaged <input type="checkbox"/> Divorced <input type="checkbox"/> Cohabit <input type="checkbox"/> Widowed	
State the name of the applicant's husband or wife or partner.	
How does the applicant support him or herself in his or her home country?	Profession or occupation
If the applicant works	Employed since
Employer	
Type of leave	
<input type="checkbox"/> Holiday <input type="checkbox"/> Leave of absence <input type="checkbox"/> Has resigned <input type="checkbox"/> Other, specify:	
If the applicant is studying – State type of leave	
<input type="checkbox"/> Study break <input type="checkbox"/> School holidays <input type="checkbox"/> Other, specify:	
Has the applicant been in Sweden before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state when	
Does the applicant have relatives who live in Sweden?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state name, age, citizenship and in what way he or she is related to these persons	
Does the applicant have travel medical insurance for the journey and stay in Sweden?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where will he or she travel after visiting Sweden?	Has he or she permission to travel into that country?

8. Other information

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Documents that you must enclose

- Copy of your ID-card, passport or equivalent, which proves your identity
- Documents which show details of your employment or equivalent and annual income (if you are paying for the applicant's journey and/or upkeep while visiting Sweden).

9. Assurance

I declare that the information that I have provided is true and that I have not knowingly omitted anything that could be of significance in an examination of this application.

NOTE! Without a signature this form is invalid.

.....
Place and date

.....
Signature

A person who provides incorrect information in the application, or knowingly omits information that is of importance, can be fined or sentenced to imprisonment. See Chapter 20, section 6, paragraph 2 of the Aliens Act (2005:716).

Write the case number on all attached documents you send to us. You will find the number at the top right corner of the letter that we sent to you.

When you have filled in the form and signed it you must send it with the attachments to:

Migrationsverket
601 70 Norrköping