

	FAMILY MEMBERS OF EU/EEA CITIZENS	YES	NO	REMARK
Th th cc	lease note! his checklist is only applicable for family members to EU/EEA citizens nat falls under the scope of the Directive 2004/38/EC. The ountry/purpose checklist is <b>NOT</b> to be submitted in addition to this hecklist.			
no is liv 20 Sv M	U citizens residing in the Member State of their own nationality do ot normally benefit from the rights granted by the Directive (as there is no element of free movement). A family member to a Swedish citizen wing in Sweden do not hold a right of residence based on Directive 004/38/EC in his/her home country, unless the EU-citizen returned to weden after having utilised the right of free movement in another Member State for a certain period. Neither is the Directive applicable when the purpose is to travel to the Member State in which the EU itizen is a national.			
	armonised Schengen Visa Application Form filled in completely and igned by the applicant.			
0	riginal valid passport.			
fe	amily members to EU/EEA citizens are exempted from paying the visa ee. ervice charges are applicable if the application is lodged at VFS.			
w	pplicant have submitted fingerprints as part of an earlier application which has been entered in the VIS within the last 59 months and is nerefore exempted from providing new fingerprints.			
fo pe pr	color photograph not older than six months. This is only compulsory or children between the age of 0-12 years or if you do not appear in erson at time of lodgment but have biometrical data submitted in a revious Schengen visa application within the last 59 months which can e reused.			
Co	opy of the EU/EEA national's passport or national identity card.			
De	ocuments that show family ties to the EU/EEA family member.			
	onfirmation from the EU/EEA family member in the host country that ne applicant will accompany or join them.			

## Information for the applicant on terms and conditions:

- All submitted documents must be in English or in Swedish.

Declaration - App	licant and VFS st	taff to sign (pleas	e tick relevant s	ection)
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	Complete	

☐ Complete☐ Not Complete





**Internal VFS** 

Name & Signature of the Biometric officer:

Name & Signature of the Data Entry officer: