

# DOCUMENT PREPARATION SERVICE - BRAZIL

Only complete this Document Preparation Request if you would like VisasDirect to complete your online visa application.

1. We will need to have your full application submitted together with this Document Preparation Service Request in order to cross check information.

2. We will need the completed Document Preparation Service Request before 2pm in order to have it returned to you the same day.

3. The completed online application must be signed by the applicant. We will send you the completed Brazil online application via encrypted email with instructions on how to decrypt.

4. An original signature is required on the completed application form, which means it will need to be printed, signed by the applicant and sent to VisasDirect by post or courier.

5. There is an additional fee of \$70.00 plus GST for completing the Brazil application form for the applicant online.

6. We are unable to offer a Pre-Check service on any Document Preparation Service Request

## PERSONAL INFORMATION

NAME AS IT APPEARS ON YOUR PASSPORT

DATE OF BIRTH

dd/mm/yyyy

GENDER

Male

Female

PREVIOUS NAMES

REASONS FOR NAME CHANGE (Ex. Marriage, Court Decision)

MARITAL STATUS

Single

Married

Divorced

Separated

Widowed

Stable Union

PLACE OF BIRTH

Select One

TOWN, COUNTY, Country

NATIONALITY

OTHER NATIONALITY

## FAMILY DETAILS

MOTHER'S DETAILS

FATHER'S DETAILS

First Name

Last Name

Country of Birth

Date of Birth

(dd/mm/yyyy)

Other Nationality

(if other than place of birth)

## TRAVEL PLANS

MAIN PURPOSE OF VISIT

DATE OF ENTRY

dd/mm/yyyy

LENGTH OF STAY

HAVE YOU EVER BEEN TO BRAZIL

Yes

No

IF YES, WHEN DID YOU LAST VISIT

LENGTH OF STAY

## PASSPORT INFORMATION

PASSPORT NUMBER

DATE OF ISSUE

dd/mm/yyyy

DATE OF EXPIRY

dd/mm/yyyy

ISSUE COUNTRY

# DOCUMENT PREPARATION SERVICE (CONT.)

## EMPLOYMENT INFORMATION

NAME OF THE COMPANY OR EDUCATIONAL INSTITUTION		JOB TITLE	
STREET ADDRESS	APT or SUITE #	TOWN	COUNTY POST CODE
EMAIL ADDRESS	PHONE NUMBER		

## PERMANENT ADDRESS

STREET ADDRESS	APT or SUITE #	TOWN	COUNTY POST CODE
EMAIL ADDRESS	PHONE NUMBER	Home	PHONE NUMBER Mobile

## CURRENT ADDRESS

STREET ADDRESS	APT or SUITE #	TOWN	COUNTY POST CODE
EMAIL ADDRESS	PHONE NUMBER	Home	PHONE NUMBER Mobile

## CONTACT IN BRAZIL

NAME	EMAIL ADDRESS	PHONE NUMBER
STREET ADDRESS	APT or SUITE #	TOWN COUNTY POST CODE

## PAYMENT METHOD

NAME ON CARD	CARD NUMBER	EXP. DATE mm/yyyy
SIGNATURE		

Have you completed all the questions? Incomplete visa questionnaires cannot be processed and will be returned for additional information. This could delay the processing of your request.

## DECLARATION

I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED TO ME AT THE BEGINNING OF THE APPLICATION. I AM AWARE OF THE CONDITIONS THAT WILL APPLY TO MY VISA AND THAT I AM REQUIRED TO ABIDE BY THEM.

SIGNATURE	DATE
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