

中华人民共和国签证申请表

Visa Application Form of the People's Republic of China

申请人须在电脑上如实、完整填写并打印本表格。请逐项用中文或英文大写字母填写，或在□内打×选择。不适用者，请写“无”或“不适用”。如有更多需要声明事项，请附另纸说明。Applicant should fill out this form truthfully and completely on a computer and print out. Please type your answer in capital English letters in the space provided or cross the appropriate box to select. Please state "N/A" or "None" if a section does not apply to you. If there is additional information to declare, please type on a separate sheet.

如申请工作签证或学习签证，或不在国籍国申请签证，或与护照偕行人同行，你还需填写签证附表(Form V.2011B)。Please also complete the Supplementary Visa Application Form (Form V.2011B) if you are not a U.S. citizen, or if you are applying for work visa or student visa, or if you will be accompanied by anyone who shares the same passport with you.

一、个人信息 Section 1: Personal information

1.1 英文姓名 Full name as shown on your passport	姓 Surname: Lavery	1.2 性别 Sex	<input type="checkbox"/> 男 M <input checked="" type="checkbox"/> 女 F	照片要求 <u>Photo requirements</u> ★ 1 张彩照 One colored photo ★ 6 个月内 Within 6 months ★ 护照照片 Passport photo ★ 正脸 Front-facing ★ 免冠 Hatless ★ 浅色背景 Light-colored background
	名 Given name: Meaghan Anne			
1.3 中文姓名 (如有, 请用汉字填写) Name in Chinese character (if applicable)	None			
1.4 别名或曾用名 Other name or previous name (if applicable)	None			
1.5 用母语书写的名字 Name in native language	Meaghan Anne Lavery			
1.6 现有国籍 Current nationality	United States of America	1.7 曾有国籍 Former nationality	None	
1.8 同时具有的国籍 Concurrent nationality	None	1.9 出生日期 Date of birth (yyyy-mm-dd)	Redacted	
1.10 出生地点(国、省/市) Place of birth (city, province/state, country)	New York, New York, USA	1.11 美国身份证号码 U.S. ID card number	None	
1.12 婚姻状况 Marital status	<input type="checkbox"/> 已婚 Married <input checked="" type="checkbox"/> 未婚 Never Married <input type="checkbox"/> 离婚 Divorced <input type="checkbox"/> 丧偶 Widowed <input type="checkbox"/> 其他(请说明) Other (Please specify):			
1.13 当前职业 (可选多项) Current occupation(s)	<input type="checkbox"/> 商人 Businessman <input type="checkbox"/> 政府官员 Government official <input checked="" type="checkbox"/> 公司职员 Company employee <input type="checkbox"/> 新闻从业人员 Staff of media <input type="checkbox"/> 教师 Teacher <input type="checkbox"/> 宗教人士 Religious worker <input type="checkbox"/> 学生 Student <input type="checkbox"/> 现役军人 Active duty military personnel <input type="checkbox"/> 家庭主妇 Housewife <input type="checkbox"/> 国会议员 Member of national parliament <input type="checkbox"/> 无业 Unemployed <input type="checkbox"/> 乘务人员 Crew member <input type="checkbox"/> 退休 Retired <input type="checkbox"/> 其他(请说明) Other (Please specify):			
1.14 护照种类 Passport type	<input type="checkbox"/> 外交护照 Diplomatic passport <input type="checkbox"/> 公务/官员护照 Service/Official passport <input checked="" type="checkbox"/> 普通护照 Ordinary passport <input type="checkbox"/> 其他证件(请说明) Other (Please specify):			
1.15 护照号码 Passport number	Redacted		1.16 护照签发日期 Date of issue (yyyy-mm-dd)	Redacted
1.17 护照签发地点(省/市及国家) Place of issue (city, province/state, country)	Los Angeles, CA, USA		1.18 护照失效日期 Expiry date (yyyy-mm-dd)	Redacted
1.19 请选择取件日期(加急需额外缴费) Please select pick-up day (Extra fee is charged for express pick-up)	<input checked="" type="checkbox"/> 正常(第 4-5 个工作日) Normal (the 4 th or 5 th working day) <input type="checkbox"/> 加急(第 2-3 个工作日) Express (the 2 nd or 3 rd working day)			

二、赴华旅行信息 Section 2: Details of travel to China

2.1 赴中国主要事由 (可选多项) Major purpose(s) of your visit(s) to China	<input checked="" type="checkbox"/> 旅游 Tourism <input type="checkbox"/> 记者常驻 As resident journalist <input type="checkbox"/> 探亲 Family visit <input type="checkbox"/> 记者临时采访 As journalist for temporary news coverage <input type="checkbox"/> 访友 Visiting friends <input type="checkbox"/> 常驻外交、领事官员 As resident diplomat or consul <input type="checkbox"/> 商务 Business trip <input type="checkbox"/> 商业演出 Commercial performance <input type="checkbox"/> 会议 Meeting <input type="checkbox"/> 执行乘务 As crew member <input type="checkbox"/> 过境 Transit <input type="checkbox"/> 留学 Study <input type="checkbox"/> 任职就业 Employment <input type="checkbox"/> 官方访问 Official visit <input type="checkbox"/> 其他 (请说明) Other (Please specify):			
	<input checked="" type="checkbox"/> 一次入境 (自申请日起 3 个月内有效) One entry valid for 3 months from date of application <input type="checkbox"/> 二次入境 (自申请日起 6 个月内有效) Two entries valid for 6 months from date of application <input type="checkbox"/> 半年多次入境 (自申请日起 6 个月内有效) Multiple entries valid for 6 months from date of application <input type="checkbox"/> 一年多次入境 (自申请日起 12 个月内有效) Multiple entries valid for 12 months from date of application <input type="checkbox"/> 其他 (请说明) Other (Please specify):			
2.3 预计首次行程抵达中国的日期 Intended date of your first entry (yyyy-mm-dd)	2012-05-28			
2.4 预计行程中单次在华停留的最长天数 Your longest intended duration of stay	6		Days	
2.5 i) 请按时间顺序列明你访问中国的地点 (省、市) Please list cities and provinces to visit in China in a time sequence	Shenzhen, Shanghai			
2.5 ii) 请按时间顺序列明你在中国停留期间的住址及电话 Please list residence(s) and phone number(s) during your stay in China in a time sequence				
	详细地址 Detailed address	城市 City	省 Province	电话 Phone number
1.	Shangri-La Hotel - 1002 Jianshe Road	Shenzhen	518001	755 8233 0888
2.	Hotel Indigo - 585 Zhong Shan Dong Er Road	Shanghai	200010	21 3302 9999
3.				
4.				
2.6 谁将承担往返中国及在中国的费用? Who will pay for your trip to China?	<input checked="" type="checkbox"/> 我本人 Myself <input type="checkbox"/> 邀请单位或个人 Inviter <input type="checkbox"/> 父母或监护人 Parent(s) or guardian(s) <input type="checkbox"/> 其他 (请说明) Other (Please specify):			
2.7 在华期间是否有医疗保险?如有, 请填写保险公司名称及保险账号。Do you have medical insurance covering your visit in China? If "Yes", please fill out the name of the medical insurance company and your account number.	<input type="checkbox"/> 是 Yes			
	<input checked="" type="checkbox"/> 否 No			
2.8 在华邀请/联系单位名称、地址及电话 Name, address and phone number of your inviter or contact unit in China	None			
2.9 在华亲友/联系人姓名、地址、电话 Name, address and phone number of your relative, friend or contact person in China	None			

三、家庭、工作或学校信息 Section 3: Information about your family, work or study

3.1 目前家庭住址 Current home address	地址 Address		城市 City	省/州 Province/State	邮编 Zip code	
	Redacted		Redacted	Redacted		
3.2 家庭电话 Home phone number			3.3 手机号码 Mobile phone number			
3.4 电子信箱 Email address	mlaverty@energycoalition.org					
3.5 工作单位或学校名称、 电话、地址 Name, phone number and address of your current employer or school	名称 Name	The Energy Coalition				
	地址 Address	15635 Alton Parkway, Suite 450		电话 Phone number	949-701-4646	
	城市 City	Irvine	省/州 Province/State	CA	邮编 Zip code	92618
3.6 主要家庭成员 Major family members	姓名 Name	国籍 Nationality		职业 Occupation	关系 Relationship	
	David Hastie		USA		Employee	Partner
3.7 紧急情况联系人 Contact person in case of emergency	David Hastie			3.8 电话号码 Contact person's phone number	Redacted	

四、其他情况 Section 4: Other information

4.1 是否曾持中国签证访问过中国？如果是，请说明最近一次访问中国的时间、地点和事由。Have you ever visited China before? If "Yes", please specify date, places and purpose of the latest visit.	<input checked="" type="checkbox"/> 否 No	
	<input type="checkbox"/> 是 Yes	
4.2 在过去的 12 个月里是否访问过其他国家或地区？如果是，请说明访问时间、地点和目的。Have you ever visited other countries or territories in the past 12 months? If "yes", please specify date, name of countries or territories and purpose of the visits.	<input type="checkbox"/> 否 No	
	<input checked="" type="checkbox"/> 是 Yes	2011-08, Sweden & Czech Republic, Tourism
4.3 是否曾在中国超过签证或居留许可允许的期限停留？ Have you ever overstayed your visa or residence permit in China?	<input type="checkbox"/> 是 Yes	<input checked="" type="checkbox"/> 否 No
4.4 是否曾经被拒绝颁发中国签证，或被拒绝进入中国？ Have you ever been refused a visa for China, or been refused entry into China?	<input type="checkbox"/> 是 Yes	<input checked="" type="checkbox"/> 否 No
4.5 是否在中国或其他国家有违法记录？ Do you have any criminal record in China or any other country?	<input type="checkbox"/> 是 Yes	<input checked="" type="checkbox"/> 否 No
4.6 是否患有以下任何一种疾病？Are you suffering from any of the following diseases? ①严重精神疾病 Serious mental disorder ②传染性肺结核病 Infectious pulmonary tuberculosis ③可能对公共卫生造成危害的其他传染病 Other infectious disease of public health hazards	<input type="checkbox"/> 是 Yes	<input checked="" type="checkbox"/> 否 No
4.7 近 30 日内是否前往过流行性疾病传染的国家或地区？ Did you visit countries or territories infected by infectious diseases in the past 30 days?	<input type="checkbox"/> 是 Yes	<input checked="" type="checkbox"/> 否 No

4.8 如果对 4.3 到 4.7 的任何一个问题选择“是”，请在下面详细说明。
 If you answered “Yes” to any of questions 4.3 to 4.7, please give details below.
 N/A

五、有关声明 Section 5: Relevant declaration

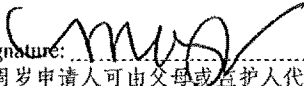
5.1 如申请工作签证或学习签证，或不在国籍国申请签证，或与护照偕行人同行，你还需填写签证附表(Form V.2011B)。Please also complete the Supplementary Visa Application Form (Form V.2011B) if you are not a U.S. citizen, or if you are applying for work visa or student visa, or if you will be accompanied by anyone who shares the same passport with you.

5.2 如果有本表未涉及而需专门陈述的其他与签证申请相关的事项，请在此或另纸详细说明。Please use the space below or a separate sheet for additional information / declaration / statement other than already provided in this application.
 None

六、签名 Section 6: Signature

6.1 我已阅读并理解此表所有内容要求，并保证所填信息的真实准确。如有不实，我愿承担一切责任。I have read and understood all the questions in this application. I declare that the information provided above is true and accurate. I shall take all responsibilities for any false information.

6.2 我理解，能否获得签证、获得何种签证、入境次数以及有效期、停留期等将由领事官员决定，任何不实、误导或填写不完整均可能导致签证申请被拒绝或被拒绝进入中国。I understand that the decision on whether to issue a visa, validity/ type of visa, number of entries, and duration of each stay will be decided by consular officers, and that any false, misleading or incomplete information may result in the refusal of a visa or denial of entry into China.


 日期 Date (yyyy-mm-dd): 2012-04-03
 Applicant's signature: _____
 注：未满 18 周岁申请人可由父母或监护人代签。Note: Parent or guardian may sign on behalf of an applicant aged under 18.

七、他人代填申请表时填写以下内容 Section 7: If the application form is completed by another person on the applicant's behalf, please fill out the following:

7.1 申请表代填人姓名 Name of the person completing this form on the applicant's behalf		7.2 与申请人关系 Relationship to the applicant	
7.3 地址 Address		7.4 电话 Phone number	
7.5 所持身份证件种类 Type of ID document		7.6 证件号码 Number of ID	
7.7 声明 Declaration 我声明本人是根据申请人要求而协助填表，并证明申请人理解并确认表中所填写内容准确无误。 I declare that I have assisted in the completion of this form at the request of the applicant, and the applicant understands and confirms that the information provided is true and correct. 代填人签名 /Signature: _____ 日期/Date (yyyy-mm-dd): _____			

以下供领事官员填写 Official use only

签证种类		有效期		停留期	
审核人		日期		备注	