

# VISA QUESTIONNAIRE CHINA

Email the following to [visa@expeditedtravel.com](mailto:visa@expeditedtravel.com):

- ☐ This completed questionnaire. You may save your answers on this file and email directly to our visa associates.
- ☐ A scan of the information/photo page of your valid passport(s).
- ☐ A scan of your valid driver's license or utility bill showing residential address and applicant's full name (No P.O. BOX)
- ☐ Scans of all previous visas in your passport(s). Former military may need to provide a copy of their military discharge docs.
- ☐ For business visa applicants: one scan of the applicant's signed letter of invitation from a Chinese sponsor, addressed to the correct consular jurisdiction. A sample of this letter with guidelines is available at our website

☐ One digital passport-style photograph- Must comply with guidelines from the Chinese Embassy. **Please follow the link :** [http://us.china-embassy.gov.cn/eng/lsw/zj/qz2021/201612/t20161206\\_4410998.htm](http://us.china-embassy.gov.cn/eng/lsw/zj/qz2021/201612/t20161206_4410998.htm) [taken against a bright white background, subject wearing clothing that contrasts with the background (i.e., colored clothing), no eyeglasses or jewelry worn by subject, etc.]..

## YOUR PERSONAL INFORMATION:

ORDER# \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Previous Legal Names: \_\_\_\_\_  
If your name has legally changed (e.g., due to marriage or divorce, via court order), list your previous name(s) here.

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Sex: ☐ Male ☐ Female

Country of Birth: \_\_\_\_\_ Place of Birth: City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Marital Status: ☐ Married ☐ Single (Never Married) ☐ Divorced ☐ Separated ☐ Widowed

Are you a Former Chinese National: ☐ YES ☐ NO

Name in Chinese (if applicable) \_\_\_\_\_

Please Note: MUST be typed in Chinese characters

Please send it via email if necessary to allow Copy & Paste:

Former Chinese Passport #: \_\_\_\_\_ Former Chinese ID #: \_\_\_\_\_

Current Nationality (Citizenship): \_\_\_\_\_ Previous Nationality (Citizenship): \_\_\_\_\_

Full Home Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell/Mobile Phone#: \_\_\_\_\_

Email Address: \_\_\_\_\_

## YOUR PASSPORT DETAILS:

Type of Passport: ☐ Personal/Tourist ☐ Official Government ☐ Diplomatic

Passport Number: \_\_\_\_\_

Date of Issue: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Date of Expiry: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Issuing Authority: ☐ US Department of State ☐ Other: \_\_\_\_\_

Have you ever had a stolen Passport?: ☐ YES ☐ NO (If Yes, please provide details below)

Stolen Passport #: \_\_\_\_\_ Country of Issue Date : \_\_\_\_\_ Issuing Authority: \_\_\_\_\_

Where was it stolen: \_\_\_\_\_ Date it was stolen (DD/MM/YYYY): \_\_\_\_\_

## YOUR CHINA VISA REQUEST:

Purpose of Visit: ☐ Business (M) ☐ Tourist (L) ☐ Crew (C) ☐ Employment (Z) ☐ Other: \_\_\_\_\_

Specific Purpose of Visit (i.e. business meetings, tour group, etc.): \_\_\_\_\_

Number of Entries: ☐ Single ☐ Double ☐ Multiple (US & Canada Citizens Only)

Validity Requested (in Months): \_\_\_\_\_ Maximum Duration of Stay (in Days): \_\_\_\_\_

## YOUR EMPLOYMENT HISTORY:

Please list your employment/work history. The consulate/embassy requires 10 years of history with at least one former employer.

\*Please start with your current Employer & use a separate sheet of paper if necessary

### Current Employment:

Name of Employer: \_\_\_\_\_ Your Position: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_ Supervisor's Telephone: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

### Previous Employment:

Name of Employer: \_\_\_\_\_ Your Position: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_ Supervisor's Telephone: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

## YOUR EDUCATION HISTORY:

Please start highest education completed, including High School.

\*Use a separate sheet of paper if necessary.

### Most Recent Educational Institution:

Name of School: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Degree Obtained: \_\_\_\_\_ Major/Area of Study: \_\_\_\_\_

### Previous Educational Institution:

Name of School: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Degree Obtained: \_\_\_\_\_ Major/Area of Study: \_\_\_\_\_

What Languages do you speak other than English (If any): \_\_\_\_\_

## YOUR FAMILY INFORMATION:

## SPOUSE INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Spouse's Place of Birth: City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Country: \_\_\_\_\_

Spouse's Current Citizenship: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

Spouse's Full Address : \_\_\_\_\_  
(if different than applicant)

## FATHER INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Father Deceased? ☐ YES ☐ NOFather's Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Father's Country of Citizenship: \_\_\_\_\_ Father's Occupation: \_\_\_\_\_

Father's Full Address : \_\_\_\_\_

## MOTHER INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Mother Deceased? ☐ YES ☐ NOMother's Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Mother's Country of Citizenship: \_\_\_\_\_ Mother's Occupation: \_\_\_\_\_

Mother's Full Address : \_\_\_\_\_

## CHILDREN INFORMATION:

Do you have Children? ☐ YES ☐ NO

CHILD'S FULL NAME	DATE OF BIRTH (DD/MM/YYYY)	CITIZENSHIP	OCCUPATION	HOME ADDRESS (If different than Parent's)

## FAMILY IN CHINA:

Do you have any relatives in China? ☐ YES ☐ NO Chinese Citizen or Resident: \_\_\_\_\_

What type of visa do they hold (if any): \_\_\_\_\_

## INFORMATION ABOUT YOUR TRIP TO CHINA:

Date of Entry: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Day Month Year

City/Port of Arrival: \_\_\_\_\_

Flight Number: \_\_\_\_\_

Airport: \_\_\_\_\_

Date of Departure: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Day Month Year

City/Port of Departure: \_\_\_\_\_

Flight Number: \_\_\_\_\_

Airport: \_\_\_\_\_

## HOTEL STAY:

Please use the table below to list the hotel information for your entire stay.

HOTEL NAME	FULL ADDRESS including street address + building/unit number, city, state/province, district	CHECK-IN DATE DD/MM/YYYY	CHECK-OUT DATE DD/MM/YYYY

## INFORMATION ABOUT INVITING ORGANIZATION IN CHINA:

Name of Contact Person in the People's Republic of China: \_\_\_\_\_

Company Name Or Hotel for Tourist: \_\_\_\_\_

Address: \_\_\_\_\_

District: \_\_\_\_\_ City: \_\_\_\_\_

Province/Region : \_\_\_\_\_ Postal Code: \_\_\_\_\_

Chinese Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

# VISA QUESTIONNAIRE CHINA

## INFORMATION ON WHO WILL COVER YOUR TRIP

Please complete if the trip is paid by someone other than yourself or your employer:

Name of Guarantor: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## YOUR TRAVEL HISTORY:

Have you visited China the past 3 years? ☐ No ☐ Yes

If yes, please provide a scan of your most recent Chinese visa.

Cities Visited: \_\_\_\_\_

Date of Entry: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Exit : \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year Day Month Year

Have you ever had a Chinese visa? ☐ No ☐ Yes

If yes, please provide a scan of your most recent visa for this country.

Visa Type: \_\_\_\_\_ Visa Number: \_\_\_\_\_ Consulate issued by (location): \_\_\_\_\_

Date of Issue : \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year

Have you ever been fingerprinted when applying for a Chinese Visa ? ☐ YES ☐ NO

Have you ever been issued a Resident Permit? ☐ YES ☐ NO

If yes, please provide Resident Permit Number: \_\_\_\_\_

Have you ever had a China visa stolen/lost? ☐ No ☐ Yes

If yes, please provide detail below:

Where was it lost: \_\_\_\_\_

When: \_\_\_\_\_

What was the Visa Number: \_\_\_\_\_

## YOUR TRAVEL HISTORY:

Please use the table below to list the countries you have visited in the last 5 years, with the date of visit.

Please list if you hold current visas for those countries. If you need additional space, please use a separate sheet of paper.

Day	Date of Visit		Country	Do hold a valid visa for this country ? Y/N
	Month	Year		

## ADDITIONAL INFORMATION:

Have you ever had a Chinese Visa Cancelled? ☐ No ☐ Yes

Have you ever entered China illegally? ☐ No ☐ Yes

Do you have a Criminal Record? ☐ No ☐ Yes

If yes, what?: \_\_\_\_\_

Do you have any serious mental disorder or infectious disease? ☐ No ☐ Yes

If yes, what?: \_\_\_\_\_

Have you visited any countries where there is an epidemic in the past 30 days? ☐ No ☐ Yes

If yes, where: \_\_\_\_\_

Have you ever been a member of the military? ☐ No ☐ Yes (complete details below)

Country: \_\_\_\_\_ Service (i.e. US Navy): \_\_\_\_\_

Highest Rank Obtained: \_\_\_\_\_ Place of Posting (city, state/province, country): \_\_\_\_\_

Military Specialization: \_\_\_\_\_

Dates of Active Service: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year Day Month Year

Are you currently serving in the military reserves? ☐ No ☐ Yes

Have you ever been Trained in Firearms, Explosives, Nuclear Devices, Chemical or Biological Products?: ☐ No ☐ Yes

Have you ever served in a Paramilitary Organization?: \_\_\_\_\_

Have you ever belonged to a professional, social, or charitable organization?: \_\_\_\_\_