

Guidelines for Filling in the China Application Questionnaire

1. Please fill in each question correctly. Answers to most questions are mandatory. If a question does not apply to you, please type "Not Applicable" and proceed.
2. If you have questions about the items in the COVA Questionnaire, you may contact us to get help.
3. The system only accepts visa applications for entry dates within the next 90 days. Applications submitted outside of this period will not be processed.

Notice: Submitting the COVA Form does not mean that you will get the visa you have applied for. The final decision on the visa will be made by the Chinese Embassy/Consulate which may be different from your application.

CHINA VISA INFORMATION APPLICATION

Name

Last Name (as shown in passport): _____

First & Middle Name(s) (as shown in passport): _____

If born in China: Chinese Name (in Chinese Characters): _____

Date of Birth: _____

Gender: Male Female

Place of Birth:

Country of Birth: _____

State/Province of Birth: _____

City of Birth: _____

Marital Status: Single Married Divorced Widowed Other

Nationality and Permanent Residence:

Current Nationality: _____

National ID Number (if applicable): _____

Other Nationalities: _____

ID Number of Other Nationalities: _____

Passport Number of Other Nationalities: _____

Other Permanent Countries or Regions: _____

Former Nationalities: _____

If you have a Former Nationality, when was your current citizenship acquired?

Month _____ Year _____

Please provide the following information if you have ever held Chinese nationality:

Former Chinese ID Number: _____

Number of your last Chinese Passport: _____

Passport Information:

Passport #: _____

Issuing Country of Passport: _____

Passport Place of Issue: _____

Passport Expiration Date: _____

Type of Visa:

Tourism Business Family Work

Other: _____

Service Speed: Normal Expedited

Visa Validity in Months: _____ (ie: 120 for 10 years)

Maximum Duration of Longest Stay: _____ (ie: 30, 60, 90 days)

Work Information:

Most Recent 5 years of Work Experience (if retired please list last job. If you have always been a housewife or other, please explain).

1. Name and Address of Employer: _____

Start Date: _____ End Date: _____

Supervisor's Name and Telephone: _____

Job Title or Position: _____

Short description of your role: _____

2. Name and Address of Employer: _____

Start Date: _____ End Date: _____

Supervisor's Name and Telephone: _____

Job Title or Position: _____

Short description of your role: _____

3. Name and Address of Employer: _____

Start Date: _____ End Date: _____

Supervisor's Name and Telephone: _____

Job Title or Position: _____

Short description of your role: _____

Education:

Highest Diploma or Degree: _____

Name of Institution: _____

Major Studied: _____

Contact Information:

Current Home Address: _____

Phone Number: _____

Email Address: _____

Family Members (Please provide information for all living family members, if no longer living please indicate):

Spouse's First and Last Name: _____

Spouse's Current Nationality: _____

Spouse's Date of Birth: _____

Spouse's Country of Birth: _____

Spouse's City of Birth: _____

Spouse's Occupation: _____

Spouse's Address: _____

Father's Full Name: _____

Father's Current Nationality: _____

Father's Date of Birth: _____

Does Father currently live in China? Yes No

Mother's Full Name: _____

Mother's Current Nationality: _____

Mother's Date of Birth: _____

Does Mother currently live in China? Yes No

Child #1 Full Name: _____

Child #1 Current Nationality: _____

Child #1 Date of Birth: _____

Does Child #1 currently live in China? Yes No

Child #2 Full Name: _____

Child #2 Current Nationality: _____

Child #2 Date of Birth: _____

Does Child #2 currently live in China? Yes No

Do you have any immediate relatives, not including parents, in China? Yes No

Name: _____ Relationship: _____

Their status in China: Citizen Resident Work

Travel Information:

Date of Arrival in China: _____

City of Arrival: _____

Date of Departure from China _____

City of Departure: _____

City of Stay: _____

Address: _____

City of stay arrival Date (if different from above): _____

Date of Departure: _____

Additional City of Stay (if applicable):

Address: _____

Date of Arrival: _____ Date of Departure: _____

Additional City of Stay (if applicable): _____

Address: _____

Date of Arrival: _____ Date of Departure: _____

Inviting Person or Organization: This is required for Business (M) or Family Visit (Q2)

Name of Inviter: _____

Relationship of Inviter if an Individual: _____

Inviter Phone Number: _____

Inviter Email: _____

Inviter Address: _____

Emergency Contact Info:

Name of Emergency Contact: _____

Relationship of Emergency Contact: _____

Emergency Contact Phone Number: _____

Emergency Contact Email: _____

Who will pay for this trip?

Self

Other

Organization

If Other:

Name: _____

Telephone: _____

Email: _____

If Organization:

Name: _____

Telephone: _____

Email: _____

Previous China Visa Info:

Have you ever been to China?

Yes

No

Have you been issued a Chinese Visa?

Yes

No

If yes, Type of Visa (ie: tourism, business, other)? _____

If yes, Previous Visa #: _____

Place of Issue: _____ Date of Issue: _____

Do you have any valid visas by other countries?

Yes

No

If so, please list which countries: _____

Have you traveled to any other countries in the past 12 months?

Yes

No

If so, please list which countries: _____

Other Info:

- | | | |
|---|-----|----|
| 1. Have you ever been refused a Chinese visa or denied entry into China? | Yes | No |
| 2. Has your Chinese visa ever been canceled? | Yes | No |
| 3. Have you ever entered China illegally, overstayed, or worked illegally in China? | Yes | No |
| 4. Do you have any criminal record in China or any other country? | Yes | No |
| 5. Do you have any serious mental disorders or infectious diseases? | Yes | No |
| 6. Have you ever visited countries or regions in the past 30 days where there is an epidemic? | Yes | No |
| 7. Do you have or have you ever been trained to have any special skill in terms of firearms, explosives, or nuclear devices, or in the biological or chemical fields? | Yes | No |
| 8. Are you serving or have you ever served in the military? | Yes | No |

If so, what was Rank _____ and your Duties _____

- | | | |
|---|-----|----|
| 9. Have you ever served or participated in any paramilitary organization, civil armed unit, guerrilla force, or rebel organization, or ever been a member of one? | Yes | No |
| 10. Have you worked for any professional, social, or charitable organization? | Yes | No |
| 11. Is there anything else you want to declare? | Yes | No |
| 12. Are you or your family members engaged, or have you or your family members ever engaged in work related to the military or law-enforcement department? | Yes | No |

If so, what was Rank _____ and your Duties _____

13. Do you or your family members belong to or have ever belonged to any political party/group?

Yes No