

## **Read before filling the form**

- To reduce the processing time of your request please give very detailed information.
- The form must be completed and signed by the applicant, and the original documentation required must be presented in person at the consulate under which jurisdiction you are 30(thirty) days following its completion.

## **STEPS:**

1. Fill in the spaces.
  2. Click "SEND" to receive your processing number and the form (RER).
  3. Print the form.
  4. Attach your picture.
  5. Sign the form.
  6. Pay the fee.
  7. Bring or send the duly completed and signed form, the original documentation, passport and proof of payment to the consulate.
- Obs.: in case of application sent by mail, include a self-addressed pre-stamped envelope for the restitution of your documentation.

## **AT THE CONSULATE:**

1. Hand the filled-in form, the required documentation and the proof of payment of fees to the clerk.
2. After processing, your documents will be returned.

## **PHOTOGRAPH SPECIFICATIONS**

- The picture must be taken against an off-white plain background.
- The applicant's face and shoulders must be centralized on the camera and he or she must be looking into the camera.
- No reflections, shadows or glares are accepted in the picture.
- The length from the bottom of chin to the top of the head must be between 31 and 36mm (millimetres) in height.
- The facial expression must be neutral.
- The eyes must be open and clearly visible.
- Glasses should not reflect any light. Neither sunglasses nor colorful frames are acceptable (no sunglasses or colored lens accepted).
- No head covering, excepting the ones used for religious reasons as long as they still enable the perfect visibility of the applicant's face.
- Children carrying toys, with pacifier or showing the hands of the adult holding them will not be accepted.

SAMPLE OF FORM PAGES TO FOLLOW:

FORM INSTRUCTIONS	GENERAL DATA	DOCUMENTS	OCCUPATION	ADDRESSES
<b>DATA</b>				
MAIN PURPOSE OF YOUR TRIP	SELECT <input type="text"/>			
<b>APPLICANT</b>				
FIRST NAME	<input type="text"/>			
MIDDLE NAME	<input type="text"/>			
LAST NAME	<input type="text"/>			
SEX	SELECT <input type="text"/>			
MARITAL STATUS	SELECT <input type="text"/>			
BIRTH DATE (dd/mm/yyyy)	<input type="text"/>			
<b>PREVIOUS NAMES</b>				
PREVIOUS NAME	<input type="text"/>			
REASON FOR CHANGES	SELECT <input type="text"/> <input type="button" value="ADD"/>			
<b>PLACE OF BIRTH</b>				
CITY	<input type="text"/>			
STATE/PROVINCE/etc.	<input type="text"/>			
COUNTRY	SELECT <input type="text"/>			
<b>NATIONALITY</b>				
NATIONALITY	SELECT <input type="text"/>			
OTHER NATIONALITIES	SELECT <input type="text"/> <input type="button" value="ADD"/>			
<b>PARENTS</b>				
MOTHER'S FULL NAME	<input type="text"/>			<input type="checkbox"/> UNKNOWN
FATHER'S FULL NAME	<input type="text"/>			<input type="checkbox"/> UNKNOWN
<input type="button" value="BACK"/> <input type="button" value="NEXT"/>				

FORM INSTRUCTIONS	GENERAL DATA	DOCUMENTS	OCCUPATION	ADDRESSES
<b>TRAVEL DOCUMENTS</b>				
TYPE	SELECT <input type="text"/>			
NUMBER	<input type="text"/>			
DATE OF ISSUE (dd/mm/yyyy)	<input type="text"/>			
DATE OF EXPIRY (dd/mm/yyyy)	<input type="text"/>			
ISSUING COUNTRY/ORGANIZATION	<input type="text"/>			
<input type="button" value="BACK"/> <input type="button" value="NEXT"/>				

FORM INSTRUCTIONS	GENERAL DATA	DOCUMENTS	OCCUPATION	ADDRESSES
<b>PROFESSION</b>				
PROFESSION	<input type="text"/>			
<b>EMPLOYER'S ADDRESS</b>				
NAME OF EMPLOYER/COLLEGE/SCHOOL	<input type="text"/>			
ADDRESS	<input type="text"/>			
CITY	<input type="text"/>			
STATE/PROVINCE/etc.	<input type="text"/>			
COUNTRY	SELECT <input type="text"/>			
ZIP CODE	<input type="text"/>			
PHONE NUMBER	<input type="text"/>			
E-MAIL	<input type="text"/>			
<input type="button" value="BACK"/> <input type="button" value="NEXT"/>				

VISA REQUEST FORM

FORM INSTRUCTIONS	GENERAL DATA	DOCUMENTS	OCCUPATION	ADDRESSES
<b>PERMANENT RESIDENTIAL ADDRESS</b>				
ADDRESS	<input type="text"/>			
CITY	<input type="text"/>			
STATE/PROVINCE/etc.	<input type="text"/>			
COUNTRY	SELECT <input type="button" value="v"/>			
ZIP CODE	<input type="text"/>			
PHONE NUMBER	<input type="text"/>			
E-MAIL	<input type="text"/>			
<b>CURRENT ADDRESS</b>				
ADDRESS	<input type="text"/>			
CITY	<input type="text"/>			
STATE/PROVINCE/etc.	<input type="text"/>			
COUNTRY	SELECT <input type="button" value="v"/>			
ZIP CODE	<input type="text"/>			
PHONE NUMBER	<input type="text"/>			
<b>CONTACT IN BRAZIL</b>				
NAME/HOTEL	<input type="text"/>			
ADDRESS	<input type="text"/>			
CITY	<input type="text"/>			
STATE/PROVINCE/etc.	SELECT <input type="button" value="v"/>			
COUNTRY	BRAZIL			
ZIP CODE	<input type="text"/>			
PHONE NUMBER	<input type="text"/>			
E-MAIL	<input type="text"/>			
ESTIMATED DATE OF ARRIVAL (dd/mm/yyyy)	<input type="text"/> <input type="button" value="calendar"/>			
LENGTH OF STAY	<input type="text"/> DAYS <input type="button" value="v"/>			
HAVE YOU EVER BEEN TO BRAZIL?	SELECT <input type="button" value="v"/>			
		PLEASE FILL THE TEXTBOX WITH THE CODE SHOWN IN LEFT BOX. <input type="text"/>		
<a href="#">IF YOU CANNOT VISUALIZE THIS IMAGE, PLEASE CLICK HERE.</a>				
<input type="button" value="BACK"/>		<input type="button" value="SUBMIT"/>		