

**SIMPLIFIED CHECKLIST: SPOUSE OR CO-HABITANT OF NORWEGIAN CITIZEN
LIVING IN THAILAND
(Please, submit documents in this order)**

Please check the boxes below and sign to confirm which documents you have submitted:

- Signed Cover Letter from online Visa application, with one passport photo glued to the letter** (*not older than three months old, 2 inches in size, white background, with no glasses*)
- Applicant's Passport** (*both new and old passport(s) if any*)
- Copy of the applicant's passport(s)** (*Place and date of issue, expiration date, all previous stamps*)
- Proof of relationship with Norwegian spouse/co-habitant** (*copy of marriage certificate or proof of co-habitation*)
- Compulsory travel medical insurance, covering all Schengen countries** (*see separate information*)
- Proof of sufficient economic resources for travel** (*either by applicant or spouse or both, or guarantee form which can be stamped at the Embassy or Consulate*)
- Original invitation letter with date and signature from spouse/co-habitant confirming current living situation, purpose of travel, itinerary, accomodation in Norway, and their intention to return to Thailand**
- Copy of spouse's passport, showing residence/stay in Thailand**

***NOTE:** Close family members of Norwegians living in Thailand can also apply for a Schengen visa with multiple entries, valid for one year or more. If so, they need a Travel Medical Insurance that is valid for at least one year. Even with a one-year multiple-entry visa, the applicant cannot stay in the Schengen area more than 90 days within any 6-month period.*

IMPORTANT

I hereby confirm that I personally have submitted this application for a visa and that all information stated in the application and the supporting documentation is true. I am aware that providing incorrect information or falsified documents deliberately are punishable acts by both Thai and Norwegian law and will lead to refusal of visa.

Date: _____ Place: _____ Signature: _____

For official use only.

Received:	Reference no.:	
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