Account Code: 73121

DOCUMENT PREPARATION SERVICE - CHINA

VisaCentral provides an optional service to assist travelers with the China visa application: our secure Document Preparation Service. The fee for this optional service is \$80.00 and is in addition to the applicable consular and processing fees. It's easy:

- 1. Type or clearly write answers to all fields on the optional Document Preparation Service request. Then save the file or scan and save the file to your computer.
- 2. Scan a copy of your passport information page.
- 3. Submit the saved files (this form and your passport information page) to us by uploading it securely at https://visacentral.com/upload-forms?service=docprep. We'll complete the visa application on your behalf in 24 hours or fewer, excluding Saturday or Sunday and contact you if any information is missing or incomplete.
- 4. We will send you the completed official China visa application via encrypted email with instructions on how to decrypt the file.
- 5. Print, inspect and sign the completed official China visa application and send it to us with the rest of your application materials to the office address listed on your visa application checklist.

Questions about this service can be answered by VisaCentral Customer Care at 866-956-6528. Do not send the other application materials until you have printed, inspected and signed your official China visa application form from VisaCentral. This is not the official visa application. It is an optional service.

| PERSONAL INFORMATION | | | |
|---|--|--|---|
| LAST NAME AS IT APPEA | RS ON YOUR PASSPORT FIRST NAME | AS IT APPEARS ON YOUR PASSPORT MIDDLE | E NAME AS IT APPEARS ON YOUR PASSPORT |
| | | | |
| GENDER | PREVIOUS NAMES (INCLUDE MAIDEN NAME) | ME IF APPLICABLE) | DATE OF BIRTH mm/dd/yyyy |
| Male Female | | | |
| CITY AND STATE OF BIRTH | COUNTRY OF BIRTH | BORN IN OR OF CHINESE DESCENT | NATIONALITY |
| | | Yes No | |
| PREVIOUS/OTHER NATIONALITIES | U.S. DRIVER LICENSE, STATE ISSUED ID, | OR MARITAL STATUS | |
| | PASSPORT NUMBER | Single Married Divo | rced Separated Widowed |
| CURRENT OCCUPATION | | | |
| Businessman Company Employ | yee 🔘 Industrial/Agricultural Worker 🤘 0 | Crew Member 🧖 Staff of Media 🧖 Religious | Worker Student NGO Staff Retired |
| Self-Employed Former/Incumb | ent Government Official (if yes, include position) | Former/Incumbent Member of Parliment (if yes | , include position) |
| | ion) Unemployed Other (if yes, incl | | |
| Details | | , | |
| Details | | | |
| | | | |
| | | | |
| CONTACT INFORMATION | | | |
| STREET ADDRESS | | APT OR SUITE # CITY | STATE |
| | | | |
| ZIP CODE | EMAIL ADDRESS | PHONE NUMBER | home PHONE NUMBER mobile |
| | | | |
| | | | |
| FAMILY HISTORY Please provide the following information | n about your immediate family members (spouse, cl | hildren, parents, or minors only) even if they are not | traveling with you. You must provide at least one family member |
| NAME | NATIONALITY | OCCUPATION | RELATIONSHIP |
| | | | |
| | | | |
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| | | | |
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| PASSPORT INFORMATION | | | | | |
|--|--|---|----------------------|--|------------------------------|
| PASSPORT NUMBER | | DATE OF ISSUE | mm/dd/yyyy | DATE OF EXPIRY | mm/dd/yyyy |
| | | | | | |
| ISSUING COUNTRY | | ISSUING CITY/PROVINCE | | U.S. ppt holders enter U. | S. Dept. of State if no city |
| | | | | | |
| TYPE OF PASSPORT Ordinary Diplomatic Government/Off | ficial DETAILS | | | | |
| Other, enter details | | | | | |
| IF YOU HAVE OTHER PEOPLE TRAVELING ON YOUR PASSE | | .OW | | | |
| NAME | GENDER | | DATE OF BIRTH | | mm/dd/yyy |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| EMPLOYMENT OR SCHOOL INFORMATION | | • | | if you are currently in school a | nd not employed full time |
| NAME | | POSITION AT EMPLOYER | OR FIELD OF STUDY | | |
| BRIEF DESCRIPTION OF YOUR WORK OR FIELD OF STUD' | Y | | | PHONE NUMBER | |
| | | | | THOME NOMBER | |
| STREET ADDRESS APT (| OR SUITE # CITY | | STATE | ZIP CODE | |
| | | | | | |
| WHAT IS THE HIGHEST LEVEL OF EDUCATION YOU HAVE COMPLETED? | DETAILS | | | | |
| College Postgraduate Other, enter de | etails | | | | |
| | | | | | |
| EMERGENCY CONTACT | | | | | |
| CONTACT'S NAME | CONTACT'S PHONE NUMBER | | CONTACT'S REI | LATIONSHIP TO APPLICANT | |
| | | | | | |
| TRAVEL PLANS | | | | | |
| DATE OF ENTRY | mm/dd/yyy | y LENGTH OF STAY | | | |
| | | | | | |
| SELECT ALL THE REASONS THAT APPLY AS TO YOUR PUR | _ | Family Payri | ion Over 180 Days | laurmaliat for t | Select all that apply |
| Tourism | As Resident Journalist | = | ion Over 180 Days | _ | emporary coverage |
| As resident diplomat or consul | Transit | Flight Crew | | Business | |
| Short-term study | Commercial Performance | Employment | | Long-term stud | dy |
| As Permanent Resident | Official Visit | As child in foster care | | Short-term visi permanent resident | t to Chinese citizen or |
| Short-term visit to foreign worker or student | As accompanying relative of foreign worker or student | n Other, enter details | | | |
| Details | | | | | |
| | | | | | |
| SELECT NUMBER OF ENTRIES AND VISA VALIDITY DESIRE | | 0 | | - | the consulate's discretion |
| One entry, valid for 3 months from date of application | Two entries, valid for 3-6 months from date of application | Multiple entries, validate of application | id for 6 months from | Multiple entries, valid of application | ror 1 year from date |
| Other, enter details | Details | | | | |
| | | | | | |
| List of Chinese Cities and Provinces being Visited | | | | | Must be in order of visi |

| RELATIONSHIP TO APPLICANT PHONE NUMBER STREET CITY/PROVINCE POSTAL CODE CITY/PROVI | LIST ALL PLACES YOU PLAN TO STAY | | |
|--|---|--|--|
| STREAT | 1 - NAME | | must be listed in order of stay. Put NA if staying at fewer than four locations. |
| THESE INFORMATION THE INFORMATIO | | PHONE NUMBER | DATE OF VISIT |
| THESE INFORMATION THE INFORMATIO | | | |
| STREET OTTY OR PROVINCE PROVINCE PROVINCE 1 - MARKE PROVINCE PROVINCE PROVINCE PROVINCE 1 - MARKE PROVINCE PR | STREET | CITY OR PROVINCE | PROVINCE |
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| STREET CITY OR PROVINCE | | | |
| STREET CITY OR PROVINCE | 3 - NAME | PHONE NI IMPER | DATE OF VISIT |
| A - NOALE STREET CITY OR PROVINCE | 3 - IVAIVIL | THONE NOMBER | DATE OF VISIT |
| A - NOALE STREET CITY OR PROVINCE | CTDEFT | CITY OR REQUIRES | DDO//WAST |
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| MINO WILL PAY FOR YOUR COST OF TRAVEL AND LIVING DURING YOUR STAY IN CHINA? Myself | 4 - NAME | PHONE NUMBER | DATE OF VISIT |
| MINO WILL PAY FOR YOUR COST OF TRAVEL AND LIVING DURING YOUR STAY IN CHINA? Myself | | | |
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| OTHER INFORMATION HAVE YOU EVER BEEN GRANTED A CHINESE VISA? No Yes, enter details HAVE YOU VISITED OTHER COUNTRIES OR TERRITORIES IN THE PART'S OF DETAILS DETAI | | | |
| OTHER INFORMATION HAVE YOU EVER BEEN GRANTED A CHINESE VISA? No Yes, enter details HAVE YOU VISITED OTHER COUNTRIES OR TERRITORIES IN THE PART'S OF DETAILS DETAI | STRFFT | CITY/PROVINCE | POSTAL CODE |
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| No Yes, enter details HAVE YOU VISITED OTHER COUNTRIES OR TERRITORIES IN THE PAST 12 MONTHS? No Yes, enter details HAVE YOU EVER OVERSTAYED YOUR VISA OR RESIDENCE PERMIT IN CHINA? No Yes, enter details HAVE YOU EVER BEEN REFUSED A VISA FOR CHINA OR REFUSED ENTEY TO CHINA? No Yes, enter details | OTHER INFORMATION | | |
| HAVE YOU VISITED OTHER COUNTRIES OR TERRITORIES IN THE PAST 12 MONTHS? No | HAVE YOU EVER BEEN GRANTED A CHINESE VISA? | DETAILS | Specify date and place of the last time you were granted the visa |
| PAST 12 MONTHS? No Yes, enter details HAVE YOU EVER OBERN REFUSED A VISA FOR CHINA OR REFUSED ENTRY TO CHINA? No Yes, enter details DO YOU HAVE A CRIMINAL RECORD IN CHINA OR IN ANY OTHER COUNTRY? No Yes, enter details ARE YOU SUFFERING FROM ANY OF THE FOLLOWING DISEASES? No Yes, enter details DID YOU VISIT COUNTRIES OR TERRITORIES INFECTED BY INFECTIOUS DISEASES IN THE PAST 30 DAYS? No Yes, enter details | No Yes, enter details | | |
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| IN CHINA? No Yes, enter details HAVE YOU EVER BEEN REFUSED A VISA FOR CHINA OR REFUSED ENTRY TO CHINA? No Yes, enter details DO YOU HAVE A CRIMINAL RECORD IN CHINA OR IN ANY OTHER COUNTRY? No Yes, enter details ARE YOU SUFFERING FROM ANY OF THE FOLLOWING DISEASES? No Yes, enter details DETAILS Serious mental disorder/ifectious pulmonary tuberculosis/Other infectious disease of public health hazards DETAILS | | DETAILS | |
| HAVE YOU EVER BEEN REFUSED A VISA FOR CHINA OR REFUSED DETAILS No | IN CHINA? | DETAILS | |
| ENTRY TO CHINA? No Yes, enter details DO YOU HAVE A CRIMINAL RECORD IN CHINA OR IN ANY OTHER COUNTRY? No Yes, enter details ARE YOU SUFFERING FROM ANY OF THE FOLLOWING DISEASES? No Yes, enter details DID YOU VISIT COUNTRIES OR TERRITORIES INFECTED BY INFECTIOUS DISEASES IN THE PAST 30 DAYS? No Yes, enter details DETAILS DETAILS DETAILS DETAILS DETAILS DETAILS DETAILS | No Yes, enter details | | |
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| INFECTIOUS DISEASES IN THE PAST 30 DAYS? No Yes, enter details | No Yes, enter details | DETAILS Serious mental disorder/ifect | ious pulmonary tuberculosis/Other infectious disease of public health hazards |
| | No Yes, enter details | | ious pulmonary tuberculosis/Other infectious disease of public health hazards |
| PLEASE USE THIS SPACE OR A SEPARATE SHEET FOR ADDITIONAL INFORMATION/DECLARATION/OR STATEMENT OTHER THAN ALREADY PROVIDED IN THIS APPLICATION | DID YOU VISIT COUNTRIES OR TERRITORIES INFECTED BY | | ious pulmonary tuberculosis/Other infectious disease of public health hazards |
| | DID YOU VISIT COUNTRIES OR TERRITORIES INFECTED BY INFECTIOUS DISEASES IN THE PAST 30 DAYS? | | ious pulmonary tuberculosis/Other infectious disease of public health hazards |

| PAYMENT DETAILS | | VisaCentral does not accept payment by cheque or cash |
|-------------------|-------------|---|
| NAME ON CARD | CARD NUMBER | EXPIRATION DATE |
| | | |
| BILLING REFERENCE | SIGNATURE | |
| | | |

By signing above, you agree to abide by our Terms and Conditions as outlined at https://visacentral.com/terms-of-use.

Have you completed all the questions? Incomplete visa questionnaires cannot be processed and will be returned for additional information. This could delay the processing of your request.