

REQUEST

for information from the Schengen Information System (SIS)

Polismyndigheten

Applicant

Fields marked with * are mandatory and must be completed

,		'
Personal identification number or date	of birth *	
Surname *		
Given name(s) *		
Complete postal address *(mandatory inf the Swedish Police Authority may need to send t mail):		
E-mail address (voluntary information):		
Request		
I hereby request information as to who	ether I am	registered in the Schengen Information System (SIS).
Select the relevant option: The reply to my request is to be sent to	o my registe	red address in Sweden.
Please find attached a photocopy of m	y valid pass	port/ID card (as the reply is not to be sent to my registered address in Sweden).
Applicant's signature (mandato	ry)	
Date *		
Signature *		

The request should be sent to:

Polismyndigheten Noa/IE SE-106 75 Stockholm SWEDEN

or

registrator.kansli@polisen.se

Requests for SIS information will typically be answered within a month.