

STATE OF ERITREA
DEP.OF IMMIGRATION & NATIONALITY
FOREIGNERS VISA APPLICATION FORM

2. PASTE
 PHOTOGRAPH

 (35x45mm)

DO NOT STAPLE

1. REFERENCE N°. _____

3. APPLICATION FOR ENTRY EXIT RE-ENTRY EXTENSION RENEWAL

PLEASE USE CAPITAL LETTERS

4.0 SURNAME		GIVEN NAME			
4.1 FORMER OTHER NAME (if different from above)			5. MOTHER'S NAME		
6. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	7.0 PLACE OF BIRTH (country) (city or town)		7.1. DATE OF BIRTH ___/___/___		
8. MARITAL STATUS <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SINGLE <input type="checkbox"/> WIDOWED		9. OCCUPATION			
10. PERMANENT ADDRESS (outside Eritrea)	Country	City/town	Street & House .No.	Telephone	
11. ADDRESS IN ERITREA	Zone	Sub Zone	City/town	Street & House .No.	Telephone
12.0 PRESENT NATIONALITY			12.1 NATIONALITY BY BIRTH		
13. PASSPORT TYPE	Number	Place of Issue	Date of Issue ___/___/___	Date of Expiry ___/___/___	

14. ENTRY VISA	
14.1 PURPOSE	<input type="checkbox"/> BUSINESS Profession _____ Intended period of stay _____ Name and address host _____ Tel. No _____ Nature of your business. _____ Funded by _____ <input type="checkbox"/> copy of host 's invitation letter
	<input type="checkbox"/> EMPLOYMENT Profession _____ Name and address of host _____ <input type="checkbox"/> Copy of a contract agreement with host.
	<input type="checkbox"/> OFFICIAL <input type="checkbox"/> Copy of a letter from the Ministry of Foreign Affairs
	<input type="checkbox"/> TOURISM Have you visited Eritrea before? <input type="checkbox"/> No <input type="checkbox"/> Yes Year(s)of visit _____ Countries visited during the last 5 years _____ Places to visit in Eritrea _____ Budget for the tour _____ Currency _____ Current Address _____
	<input type="checkbox"/> STUDENT <input type="checkbox"/> Copy of a letter from the school to enroll.
	<input type="checkbox"/> FAMILY VISIT Name and address of host _____ Relationship with the host (family) to visit _____ Intended period of stay _____ <input type="checkbox"/> Copy of invitation letter
	<input type="checkbox"/> TRANSIT Specify reason for your stay _____ Your final destination _____ <input type="checkbox"/> Copy of forward air ticket and entry visa to your destination
	<input type="checkbox"/> OTHER Specify reason for your visit _____ Means of support _____ Intended period of stay _____

15. EXIT / RE-ENTRY VISA

15.1 COUNTRY OF DESTINATION			
15.2 RESIDENT PERMIT No. (For residents in Eritrea)	Place of Issue	Date of Issue / /	Date of Expiry / /
15.3 PURPOSE	<input type="checkbox"/> EXIT FOR GOOD <input type="checkbox"/> TRAINING	<input type="checkbox"/> BUSINESS <input type="checkbox"/> MEDICAL	<input type="checkbox"/> OFFICIAL <input type="checkbox"/> OTHER <input type="checkbox"/> TOURISM
15.4 GOOD FOR	<input type="checkbox"/> SINGLE	<input type="checkbox"/> MULTIPLE VISA VALID FOR _____	

16. VISA EXTENSION/RENEWAL

Type of Visa	Place of Issue	Date of Issue / /	Purpose of Extension
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17. Children (Application must be submitted separately for each passport holder)

No.	NAME	SEX	PLACE OF BIRTH	DATE OF BIRTH		
				DATE	MONTH	YEAR
1						
2						
3						

18. I _____ certify that I have read and understood all the questions set forth in this application form and the answers I have given are true and correct to the best of my knowledge.

Signature _____ Date ____/____/____

19. FOR OFFICIAL USE ONLY

19.1 NAME AND SIGNATURE OF REGISTRAR _____	DATE ____/____/____
19.2 DECISION TAKEN _____	
VISA GOOD FOR <input type="checkbox"/> SINGLE <input type="checkbox"/> MULTIPLE VISA VALID FOR _____	
THE VISA IS EXTENDED/RENEWED UP TO ____/____/____ (for visa extension/renewal only)	
REMARKS _____	AMOUNT TO BE PAID _____ CURRENCY _____
NAME & SIGNATURE OF AUTHORITY _____	DATE ____/____/____
RECEIPT No. _____	VISA No. _____ SEAL →
19.3. RESERVED FOR CASHIER	

20. VERIFICATION

Reception	Photo capturing	Data Capturing	Cash Receipt	Verification	Printing	Quality Control	Issuance