

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

1. REFERENCE N°. _____

3. APPLICATION FOR ENTRY EXIT RE-ENTRY EXTENSION RENEWAL

PLEASE USE CAPITAL LETTERS

2. PASTE
PHOTOGRAPH

(35x45mm)

DO NOT STAPLE

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.
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"/> TRANSIT Specify reason for your stay _____		<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	
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 _____
NAME & SIGNATURE OF AUTHORITY _____		CURRENCY _____
RECEIPT No. _____		DATE _____ / _____ / _____
		SEAL →
19.3. RESERVED FOR CASHIER		

20. VERIFICATION

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