



FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA VISA APPLICATION FORM

REQUEST NO

PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM.

FIRST NAME.....		MIDDLE NAME.....		LAST NAME.....	
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF BIRTH D____/M____/YY____		COUNTRY OF BIRTH.....	
PRESENT NATIONALITY..... ANY OTHER.....					
PASSPORT TYPE <input type="checkbox"/> ORDINARY <input type="checkbox"/> TRAVEL DOCUMENT <input type="checkbox"/> SERVICE <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> ALIEN <input type="checkbox"/> OTHER.....					
<input type="checkbox"/> TRAVEL DOCUMENT NUMBER..... ISSUE DATE D____/M____/Y____ EXPIRATION DATE D____/M____/Y____					
HOME /MAILING ADDRESS.....					
CITY/TOWN.....		STATE/REGION.....		ZIP/POSTAL CODE.....	
DAY TEL.....		EVENING TEL.....		FAX.....	
				E-MAIL.....	

CHILDREN/ DEPENDANTS ON THE SAME PASSPORT

	FIRST NAME	MIDDLE NAME	LAST NAME	SEX	BIRTH DATE (D/M/Y)	BIRTH PLACE
1						
2						
3						
4						
5						

DO NOT WRITE IN THIS SPACE
FOR OFFICIAL USE ONLY/ TO BE FILLED AT HEAD OFFICE

DATE OF ENTRY.....	PORT OF ENTRY.....	VISA NUMBER.....	VISA TYPE.....
PLACE OF ISSUE.....	DATE OF ISSUE.....	EXPIRATION DATE.....	
ADDRESS IN ETHIOPIA: HOTEL.....	TEL.....	CONTACT PERSON.....	TEL.....

CURRENT REQUEST

PLACE OF REQUEST.....	REQUESTED VISA TYPE.....	DURATION (DAYES).....	PHOTO <i>Attach one passport size photograph</i> <i>WRITE YOUR NAME ON THE BACK OF THE PHOTOGRAPH</i>
ENTRIES: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE <input type="checkbox"/> MULTIPLE	NUMBER OF SUPPORTING DOCUMENTS.....		

TO BE COMPLETED BY PROXY/ GUARDIAN

FIRST NAME.....	MIDDLE NAME.....	LAST NAME.....
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	CONTACT PERSON/ ORGANIZATION.....	
REGION.....	ZONE.....	K.KETEMA (WOREDA).....
		KEBELE.....
		HOUSE #.....
		TEL.....

I THE UNDERSIGNED DECLARE THAT ALL THE ABOVE MENTIONED STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE

FULL NAME & SIGNATURE

DATE