

## REPUBLIC OF NAMIBIA MINISTRY OF HOME AFFAIRS DEPARTMENT OF CIVIC AFFAIRS IMMIGRATION CONTROL ACT, 1993

## APPLICATION FOR VISA (section 12 and 13/ Regulation 11)

	(section 12 and 13/ Regulation 11)	Date of issue:
١.	Surname:	Date of expiry:
2.	First Names:	24.0 51 5Aprily
3.	Maiden Name (if applicant is or was a married woman):	Remarks:
	ITEMS 4 TO 10 TO BE COMPLETED BY INSERTING AN "X" IN THE APPROPRIATE BOX	
١.	Sex: Male Female	
j.	Marrital Status: Never Married   Married   Divorced   Widow/Widower	
6.	Have you at any time applied for a permit to settle permanently in Namibia?	
7.	Have you ever been restricted or refused entry into Namibia? Yes No	Signature:
3.	Have you ever been deported or ordered to leave Namibia?	Date:
9.	Have you ever been convicted of any crime in any country? Yes No	
0.	Are you suffering from tuberculosis, or any other contagious lung disease; trachoma, or a frambesia, yaws, scabies or any other contagious bacterial or other skin disease; syphilis or leprosy or acquired immune deficiency syndrom virus (aids virus), or any mental illness	or any other venereal disease;
1.	If the reply to any of the questions 6 to 9 is in the affirmative, attach full particulars.	
2.	Birth (a) Date:	Country:
3.	Citizenship: (If acquired by naturalization, sta	ate original citizenship.)
4.	Passport: (a) Number:	z
	(c) Date of issue: (d) Date of expiry:	
	(e) Is passport valid for travel to Namibia?	
15.	(a) Present residential address:	
	(b) Telephone number: (Code:) No.:	
16.	Address and period of residence in country of which you are a permanent resident:	
	(a) Residential address:	
	(b) Telephone number: (Code:) No.:	
	(c) Period:	
7.	Occupation pr profession:	
18. I	Firm, company, university, etc., to which you are attached or which you represent:	
	(a) Name and adress of employer:	
	(b) Telephone number: (Code:) No.:	
	(c) Nature of business:	
	(d) If a student, name of university to which you are attached and the course pursued: $\dots$	
0	If apparential by your wife and shillers state.	
9.	If accompanied by your wife and children state:	DI AGE OF DIDTU
	FIRST NAMES DATE OF BIRTH	PLACE OF BIRTH
	(a)	2.2
	(b)	
	(c)	
έΟ.	(a) What amount of money will you have available on arrival in Namibia for your own use	? N\$
	(b) Will you be in possession of an onward / return ticket? Yes No	
	(N.B. Congrete applications have to be completed in respect of your engage or children ever the a	as at 1C veges and children travalling with their own necessary

FOR OFFICIAL USE ONLY

**Approved / Not Approved** Single / Multiple Entry

## NOTE: COMPLETE ONLY PART A OR B (A) HOLIDAY / BUSINESS / WORK / TRANSIT VISA

1.	Intended date and port of arrival in Namib	oia:		
2.	(a) What is the purpose of your visits?			
	(b) If it is for business purposes, explain in detail the nature of business:			
	(c) Duration of intended visit (Number of days, weeks or months):			
3.	Places to be visited in Namibia (full addresses, including telephone number must be provided):			
4.	If the purpose of your visit is for medical treatment, please provide the following information:			
	(a) Name of doctor, hospital or clinic you will visit:			
	(b) Who will pay for your medical expenses and hospital fees:			
	(c) If you are liable for the expenses and fees above, state amount of funds available:			
5.	Proposed residential addres in Namibia:			
6.	Names and address of relatives in Namibia:			
	NAME	ADDRESS AND TELEPHONE NUMBER	RELATIONSHIP	
	(a)			
	(b)			
8.	Do you contribute professionally or otherwise to publications, radio, television or films? If so, please give details:			
9.				
	(b) Mode of travel to destination:			
	(c) Intended day and port of departure:			
	(d) Is your entry to that destination assured, e.g. do you hold a visa or a permit for permanent or temporary residence? (proof to be submitted)			
10.				
		(b) RETURN VISA		
IMF	PORTANT			
An	applicant has to:			
(i)	produce his or her passport or travel docum	nent; and		
		in Namibia if not endorsed in his or her passpor		
1.	(a) Kind of permit and number:			
	(b) Date of departure:			
	(c) Expected date of return:			
2.	Particulars of residence in Namibia:			
	DATE OF FIRST ENTRY	PORT OF ENTRY	PERIODS OF RESIDENCE IN NAMIBIA From To	
3	Countries to which you will be travelling:			
Ο.		(c)	(d)	
4.	2.7		(4)	
l so		ven by me are true in substance and in fact and		
. 50	,	•	-	
Da	te:	Signature:		

(N.B. Only the signature of the applicant will be accepted.)