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File No.:



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

APPLICATION FOR VISA

	(section 12 and 13/ Regulation 11)	Date of issue:	
١.	Surname:	Date of expiry:	
2.	First Names:		
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		
i.	Marital 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:		
3.	Citizenship: (If acquired by naturalization, sta	ate original citizenship.)	
4.	Passport: (a) Number:		
	(c) Date of issue:		
	(e) Is passport valid for travel to Namibia?		
5.	(a) Present residential address:		
	(b) Telephone number: (Code:) No.:		
6.	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:		
8.	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:		
9.	If accompanied by your wife and children state:		
	FIRST NAMES DATE OF BIRTH	PLACE OF BIRTH	
	(a)		
	(b)	,-,	
	(c)	(-)	
20.	(a) What amount of money will you have available on arrival in Namibia for your own use		
	(b) Will you be in possession of an onward / return ticket? Yes No		
	(N.B. Separate applications have to be completeds in respect of your spouse or children over the a	age of 16 years and children travelling with their own passports \	
		-g , our our or maron automing mar aron passports.)	

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

1.	Intended date and port of arrival in Namibia:		
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)		
	Date of last visit, if any, to Namibia:		
8.	8. Do you contribute professionally or otherwise to publications, radio, television or films? If so, please give details:		
9.	(a) Destination after leaving Namibia:		
	(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	Reasons for travelling through Namibia?		
(b) RETURN VISA			
IMPORTANT			
An	applicant has to:		
	(i) produce his or her passport or travel document; and		
	(ii) submit proof of his or her right of residence in Namibia if not endorsed in his or her passport.		
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:		
-	(a) (b) (c) (d)		
4.	Purpose of journey (explain fully):		
۱s	olemnly declare that the above particulars given by me are true in substance and in fact and that I fully understand the meaning thereof.		
Da	tte:Signature:		
	(N.B. Only the signature of the applicant will be accepted.)		

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