REPUBLIC OF RWANDA



EMBASSY OF THE REPUBLIC OF RWANDA IN THE NETHERLANDS

PHOTO	

	VIS	SA APPLICATI	ON FORM	
1. Family name (as in passport	t)	2. Middle nam	ne	FOR OFFICIAL USE ONLY
3. First name(s) (as in passpor	t)	4. Date of birt	h (year-month-day)	— Date of application:
5. ID-number		6. Sex	Male Female	
7. Place of birth		8. Marital state	us:	
City :		Single	☐ Married ☐ Divorced	
Country		Widowed	Never married Other	
9. Citizenship at birth		10. Current ci	tizenship	
11. Father's full name		12. Mother's f	ull name	
13. Type of passport	Travel Docu	ment (1951 Co	nvention)	
☐ Ordinary Passport	Alien's pass			Supporting documents:
Diplomatic Passport	Other (pleas	se specify)		☐ Valid passport ☐ Invitation letter
Service Passport				Hotel booking Recommendation letter Copy of hosts ID
14. Passport number	15. Issue and e	xpiry date	16. Place of issue	☐ Itinerary Other:
17. If you are resident in a coureturn to that country? No Yes, (number and		·	I rigin, have you permission to	

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18. Current profession	Current occupation	1	
19. Present work address	Telephone/ Fax Nu	ımber	
	E-mail address		
20. Applicant's home address	Telephone number		
	E-mail address		
21. Type of Visa: Transit Short stay Lo		22. Number of entries requested Single Entry Multiple entry	Type of Visa:
23. Duration of stay (Number days	s): days		Single Entry
24. Have you ever been denied a No Yes - When		nyother African country?	☐ Transit☐ Tourist☐ Business☐ Work☐ Education☐
country ?	·	leave Rwanda or anyother African	Other
26. In the case of transit, have you No Yes, valid until:/		the final country of destination?	
27. Purpose of travel Official Tourism Private visit (family or friends) Other (please specify)	☐ Business ☐ Medical reasons	☐ Cultural/Sports	Visa: Refused Granted Pending Valid From:
			То:
28. Date of arrival/		Date of departure	
30. Point of first entry or transit roo	ute 31.	Means of transport	
32. Who is paying for your trip an Myself Host person(s) C (State who and how)		ng your stay in Rwanda?	

	mporary address	s in Rwanda.	company in Rwa		pplica	ble, give name o	of hotel
Phys	sical address						
Tele	phone						
E-ma	ail address						
)ther:	er's Cheque	Credit cards				
35 . S	Spouse (If application	able)					
Fam	ily name			Nationality			
Midd	le name			Date of birth	1		
	name			Place of birt			
36. <i>A</i>	Accompanying cl	nildren (Annli	cation must be s	uhmittad san	arata	ly for each nassi	ort)
	. , ,	maron (/ tppii	cation mast be s	ubiliilled sep	crate	iy ioi cacii passi	JOIL)
				labiliittea sep)OIT)
1	Family Name	, , , , , , , , , , , , , , , , , , ,	First name	партикеа зер		of birth	
1		тистот (, фрт		иришей зер			
2				abrillited sep			
2		maron (, tppn		ubriilled sep			
2		maron (, tppn		abrillited sep			
2		maron (, tppn		abriilled sep			
37. form know	Family Name I certify that I have and the answer	ave read and s I have furn	d understood all nished on this fod that possession	the question	Date	forth in this apporrect to the bes	lication t of my