

## REPUBLIC OF SOUTH SUDAN MINSTRY OF INTERIOR DIRECTORATE OF PASSPORT & IMMIGRATION

## **APPLICATION FOR ENTRY VISA**

Photo Paste Here

A. 6. 12.0	(MUST FILL IN CAPITAL LETTERS ONLY)
SURNAME	
OTHER NAMES	
NATIONALITY	SEX MALE FEMALE DATE OF BIRTH / / /
PLACE OF BIRTH	COUNTRY OF RESIDENCE
PASSPORT NO.	PASSPORT TYPE ORDINARY DIPLOMATIC TEMPORARY
PLACE OF ISSUE	DATE OF ISSUE / / /
DATE OF EXPIRY	/ / OCCUPATION
NAME OF THE ORGANISATION / COMPANY	
PURPOSE OF VIST	TYPE OF ENTRY SINGLE MULTIPLE
PERIOD OF STAY	1 MONTH 3 MONTHS 6 MONTHS 12 MONTHS PORT OF ENTRY
PORT OF DEPARTU	RE MEANS OF TRANSPORT BY ROAD BY AIR BY SEA
ANY OTHER DESCR	IPTION
CURRENTLY RESIDING COUNTRY (ADDRESS & CONTACT NUMBER)	
SOUTH SUDAN (AE CONTACT NUMBER	
APPLICANT'S SIGN	DATE DATE
FOR OFFICE USE ONLY	
RECEIPT NUMBER	VISA/RP NUMBER
APPROVED: ENTRY TYPE SINGLE MULTIPLE PERIOD OF STAY 1 MONTH 3 MONTHS 6 MONTHS 12 MONTHS	
COMMENTS	
OFFICER NAME	DESIGNATION
OFFICER'S SIGNATURE	DATE