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Approved / Not Approved

Single / Multiple Entry



REPUBLIC OF NAMIBIA MINISTRY OF HOME AFFAIRS

DEPARTMENT OF CIVIC AFFAIRS IMMIGRATION CONTROL ACT, 1993

APPLICATION FOR VISA

(N.B. Separate applications have to be completed in respect of your spouse or children over the age of 16 years and children travelling with their own passports.)

(b) Will you be in possession of an onward / return ticket? Yes

IMMIGRATION CONTROL ACT, 1993	
APPLICATION FOR VISA	File No.:
(Sections 12 AND 13 / Regulation 11)	Date of Issue:
1. Surname:	Date of expiry:
2. First Names:	
3. Maiden name (if applicant is or was a married woman):	· ·
ITEMS 4 TO 10 TO BE COMPLETED BY INSERTING AN "X" IN THE APPROPRIATE BOX 4. Sex:	Remarks: Signature:
9. Have you ever been convicted of any crime in any country? Yes No	Date:
yaws, scabies or any other contagious bacterial other skin disease; syphilis or a immune deficiency syndrome virus (aids virus), or ant mental illness or affliction 11. If the reply to any one of the questions 6 to 19 is in the affirmative, attach full par 12. Birth: (a) Date: (b) Place: (if a 13. Citizenship: (if a 14. Passport: (a) Number: (b) Place of issue: (d) Date of issue: (e) Date of issue: (d) Date of expiry: (e) Is passport valid for travel to Namibia: Yes No	Yes No iculars Country: cquired by naturalization, state original citizenship
(6) Telephone number: (Code:) No:	
(a) Residential address:	
(b) Telephone number: (Code:) No:	
(c) Period:	
17. Occupation or profession:	
18. Firm, company, university, etc., to which you are attached or which you represent: (a) Name and address 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 pursu	ed:
19. If accompanied by your wife and children, state: FIRST NAMES DATE OF BIRTH	PLACE OF BIRTH
(a)(a)	(a)
(b)(b)	(b)
(c)(c)	(c)
20. (a) What amount of money will you have available on arrival in Namibia for your	own use? N\$

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 visit? (b) If it is for business purposes, explain in det	ail the nature of business:				
	(b) It it is for business purposes, explain in acc					
	(c) Duration of intended visit (Number of days, weeks or months)					
3.	Places to be visited in Namibia (full address, including telephone number must be provided):					
4.	If the purpose of your visit is for medical treat	ment please provide the following	information:			
٠.	(a) Name of doctor, hospital or clinic you will (b) Who will pay your medical expenses and h	visit:				
	(c) If you are liable for the expenses and fees a	above, state amount of funds availa	ole:			
Proposed residential address in Namibia:						
6.	Names and addresses of relatives in Namibia:	IEI. NO				
0.	NAME ADDR	ESS AND TELEPHONE NUMBER	R RELATION	SHIP		
	(b)					
7.	Date of last visit, if any, to Namibia:					
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:					
	d) Is your entry to that destination assured, e.g. do you hold visa or a permit for permanent or temporary residence? (Proof to be					
	submitted)					
10.	Reasons for travelling through Namibia:					
		(B) RETÜRN VISA				
IM	PORTANT					
Δn	applicant has to:					
ക	produce his or her passport or travel documen	t; and				
(ii)	submit proof of his or her right of residence in	Namibia if not endorsed in his or l	ner 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 RESID	ENCE IN NAMIBIA To		
3.	Countries to which you will be travelling:					
	(a) (b)	(c)	(d)			
4.	Purpose of journey (explain fully):					
I sc	lemnly declare that the above particulars given b	y me are true in substance and in fa	et and that I fully understand	the meaning thereof.		
De	te	Signature:				
/N	B. Only the signature of the applicant will be	accepted)				