



THE REPUBLIC OF UGANDA
VISA APPLICATION

SERIAL NO. (For official use only; please do not write in this space)

1. Family Name:

2. Other names:

3. Former Name(s):

4. Address/Telephone

a. Permanent Address:

b. Present Address:

c. Telephone No (s): Home: (.....) Work: (.....)

d. E-mail:

5. Nationality

6. Date and Place of Birth
Day Month Year

7. Marital Status: (check/tick one): Married Single Divorced

8. Other family members accompanying applicant: (complete appropriate line/s)

Name	Date of Birth	Place of Birth
Spouse.....		
Child.....		
Child.....		
Child.....		

9. Passport No: Issued at: On:

Type (check/tick one) Diplomatic Official Ordinary

10. Type of Visa required (check/tick one)

Transit Single Entry Multiple Entry (Six Months) Multiple Entry (12 Months)

11. Proposed Date of Arrival:
Day/Month/Year

Duration of Stay:

9. Reason for Journey:

10. Date(s) of any Previous Visit(s):

a. If in transit, ultimate destination:

b. Has a VISA been obtained for Country of Destination?

11. Any contact person in the Country of which VISA is applied:

a. Name(s):
First Last

b. Phone:

12. The full address in Uganda where you intend to stay:

Applicant(s) Signature: Date: 20.....

