FOR OFFICIAL USE ONLY Approved / Not Approved Single / Multiple entry



		File No.:					
MAILY CHREATA		Date of issue:					
REPUBLIC OF NAMIBIA Ministry of Home Affairs and Immigration Immigration Control Act, 1993 APPLICATION FOR VISA (Sections 12 and 13 / Regulation 11)		Date of e	Date of expiry:				
		Remarks:					
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tens 4 to 10 to be completed by inserting an	A in the appropri	rate oox.	6:	Signature:			
1. Surname:				C:			
2. First names:			Date:				
3. Maiden name (if applicant is or was a marr	ried woman):			_		151111	
4. Sex: Male Female	5. Marital status:	Never Married	Married	Щ	Divorced	Widow/Widower	
6. Have you at any time applied for a permit	to settle permanen	itly in Namibia?	Yes	No			
7. Have you ever been restricted or refused er	ntry to Namibia?		Yes	No			
8. Have you ever been deported or ordered to	leave Namibia?		Yes	No			
9. Have you ever been convicted of any crime	in any country?		Yes	No			
1. If the reply to any one of the questions 6 to	10 is in the affir	mative, attach full pa	Yes rticulars.	No			
3. Citizenship: 4. Passport: (a) Number: (c) Date of issue: (e) Is passport valid for travel to Namibia:		(b) Place	of issue	d by r		state original citizenshi	
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(b) Will you be in possession of an onward/return ticket? Yes No

NOTE: COMPLETE ONLY PART A OR B

(a) (b) Date of last visit, if any, to Namibia: Do you contribute professionally or otherwise to publications, radio, television or films? If so, give details: (a) Destination after leaving Namibia: (b) Mode of travel to destination: (c) Intended date 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 st. Reasons for travelling through Namibia: RETURN VISA PORTANT applicant has to: produce his or her passport or travel document; and submit proof of his or her right of residence in Namibia if not endorsed in his or her passport. (a) Kind of Permit and number: (b) Date of departure: (c) Expected date of return: Particulars of Residence in Namibia: Date of first entry Port of entry Periods of residence in Namibia Countries to which you will be travelling: (a) (b) (c) (d) Purpose of journey (explain fully):	Intended date and port of arrival in Na	mibia:		
(e) Duration of intended visit (Number of days, weeks or months) Places to be visited in Namibia (full address, including telephone number must be provided) 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 your medical expenses and hospital fees: (c) If you are liable for the expenses and fees above, state amount of funds available: Proposed residential address in Namibia: Name Address and Telephone number Relationship (a) (b) Date of last visit, if any, to Namibia: Do you contribute professionally or otherwise to publications, radio, television or films? If so, give details: (a) Destination after leaving Namibia: (b) Mode of travel to destination: (c) Intended date 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 st submit proof of his or her right of residence in Namibia if not endorsed in his or her passport. (a) Kind of Permit and number: (b) Date of departure: (c) Expected date of return: Particulars of Residence in Namibia: Date of first entry Port of entry Periods of residence in Namibia Countries to which you will be travelling: (a) (b) (c) (d) Purpose of journey (explain fully):	(a) What is the purpose of you visit?_	NOT THE REAL PROPERTY OF THE PERSON OF THE P		
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(N.B. Only the signature of the applicant will be accepted)