

STATE OF ERITREA
 DEP. OF IMMIGRATION & NATIONALITY
 APPLICATION FORM FOR VISA

2. PASTE
 PHOTOGRAPH

(35x45mm)

DO NOT STAPLE

1. REFERENCE N°. _____

3. APPLICATION FOR	<input type="checkbox"/>	ENTRY	<input type="checkbox"/>	EXIT
	<input type="checkbox"/>	RE-ENTRY	<input type="checkbox"/>	EXTENSION/ RENEWAL

(PLEASE USE CAPITAL LETTERS)

4. FULL NAME AS IN PASSPORT					
4.1 FORMER OTHER NAME (if different from above)			5. MOTHER'S NAME		
6. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		7. PLACE OF BIRTH (country) (city or town)		7.1. DATE OF BIRTH Date Month Year / / /	
8. OCCUPATION	9. PRESENT NATIONALITY	9.1 NATIONALITY BY BIRTH	10. ERITREAN ID No.		
11. MARITAL STATUS <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SINGEL <input type="checkbox"/> WIDOWED					
12. PASSPORT TYPE	Number	Place of Issue	Date of Issue / /	Date of Expiry / /	
13. PERMANENT ADDRESS (outside Eritrea)	Country	City/town	Street & House .No.	Telephone	
14. ADDRESS IN ERITREA	Zone	Sub Zone	City/town	Street & House .No.	Telephone

15. ENTRY VISA

15.1 PURPOSE OF ENTRY	<input type="checkbox"/>	BUSINESS	<input type="checkbox"/>	EMPLOYMENT	<input type="checkbox"/>	TOURISM	<input type="checkbox"/>	OFFICIAL
	<input type="checkbox"/>	STUDENT	<input type="checkbox"/>	FAMILY VISIT	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	TRANSIT
If transit, entry visa to the country of destination valid until / /								
15.2 ENTRY DESIRED	<input type="checkbox"/>	SINGLE	<input type="checkbox"/>	MULTIPLE	15.3 PERIOD OF STAY			
15.4 HOST (REFERENCE) IN ERITREA (for non resident aliens)	Zone	City/town	Street & House .No.	Telephone				

16. EXIT / RE-ENTRY VISA

16.1 COUNTRY OF DESTINATION								
16.2 RESIDENT PERMIT No. (if resident in Eritrea)	Place of Issue	Date of Issue / /	Date of Expiry / /					
16.3 PURPOSE	<input type="checkbox"/>	RESIDE ABROAD	<input type="checkbox"/>	BUSINESS	<input type="checkbox"/>	EMPLOYMENT	<input type="checkbox"/>	OFFICIAL
	<input type="checkbox"/>	TOURISM	<input type="checkbox"/>	TRAINING	<input type="checkbox"/>	MEDICAL	<input type="checkbox"/>	OTHER
16.4 GOOD FOR	<input type="checkbox"/>	SINGLE	<input type="checkbox"/>	MULTIPLE	16.5 VISA VALID FOR			

