

REPUBLIC OF NAMIBIA

MINISTRY OF HOME AFFAIRS

DEPARTMENT OF CIVIC AFFAIRS IMMIGRATION CONTROL ACT, 1993 APPLICATION FOR VISA

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

File No:____

ALL	ICATION FOR	VISA						
(Section	s 12 and 13 / Regular	tion 11)		Date of Issue:				
1. Surname:				Date of Expiry:				
2. First Names:								
3. Maiden name (if applican				Damarka				
ITEMS A TO 10 TO DE COMB	LETED DA INGEDTING AND	"" IN THE A DDI	DODDIATE DOV	Remarks:				
ITEMS 4 TO 10 TO BE COMP		X IN THE APPI	ROPKIALE BOX					
4. Sex: Male 5. Marital	Female							
Status Never Married	Married Divorce	ed Wido	w/Widower					
6. Have you at any time apple permanently in Namibia?	ied for a permit to settle		N-					
• •	-4- d C d t N	Yes	No	Ciamatuma				
7. Have you ever been restriction		Namibia? Yes	No	Signature:				
8. Have you ever been deport leave Namibia?		Yes	No	Date:				
9. Have you ever been convi	cted of any crime in any	country? Yes						
	Are you suffering from tuberculosis, or any other contagious lung disease; trachoma, or any other chronic eye infection, frambesia, yaws, scabies or any other contagious bacterial or other skin disease; syphilis or any other venereal disease; or							
leprosy or acquired immu					Yes	No		
11. If the reply to any one of t	he guestions 6 to 19 is ir	the affirmativ	e. attach full pa	rticulars				
12. Birth: (a) Date:	(b)	Place:	-	Country:				
13. Citizenship:			(if acquir	ed by naturalization, state	e original cit	izenship		
14. Passport: (a) Number		(b) Pla	ce of issue:					
(c) Date of issue		(d) Dat	te of expiry:					
(e) Is passport valid for tra	avel to Namibia?	Yes	No					
15. (a) Present residential add								
(b) Telephone number: (C	ode:		No:					
16. Address and period of res								
(a) Residential address: _								
(b) Telephone number: (C)	No:					
(c) Period:								
17. Occupation or profession:								
18. Firm, company, university(a) Name and address of e	employer:							
(b) Telephone number: (C	ode:)	No:					
(c) Nature of business:								
(d) If a student, name of u	niversity to which you ar	e attached and	the course purs	sued:				
19. If accompanied by your w	if and abildum state:							
19.11 accompanied by your w FIRST NAMES		DATE OF B	IRTH	PLACE O	F RIRTH			
(a)								
(b)	(h)			(h)				
(c)	(c)			(c)				
(-)	(0)			(*/				

- $20.\left(a\right)$ What amount of money will you have on arrival in Namibia for your own use? N\$
 - (b) Will you be in possession of an onward/return ticket? Yes No

NOTE: COMPLETE ONLY PART A OR B

(A) HOLIDAY / BUSINESS / WORK / TRANSIT VISA

	Intended date and port of arrival in Namil									
2.	(a) What is the purpose of your visit?(b) If it is for business, explain in detail the	ne nature of business:								
	(c) Duration of intended visit (number of	uration of intended visit (number of days, weeks or months):								
3.		laces to be visited in Namibia (full address, including telephone number must be provided):								
1	If the purpose of your visit is for medical	treatment, places provide the following in								
4.	(a) Name of doctor, hospital or clinic you(b) Who will pay your medical expenses a	will visit:and hospital fees:								
5.	(c) If you are liable for the expenses and fees above, state amount of funds available:									
6.	Name and addresses of relatives in Namil	Telepnone numb bia:	er:							
	NAME (a)	ADDRESS AND TELEPHONE NUMBER								
7										
8.	Date of last visit, if any to Namibia:									
9.	(a) Destination after leaving Namibia:									
	(b) Mode of travel to destination:									
	(c) Intended date and port of departure:(d) Is you entry to that destination assured submitted)	d, e.g. do you hold visa or permit for perm	anent or temporary re	sidence? (Proof to be						
10	. Reasons for travelling through Namibia:									
		(B) RETURN VISA								
IN	IPORTANT	(b) RETURN VISA								
114										
(i)	a applicant has to: produce his or her passport or travel docu									
) submit proof of his or her right of residen (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	DENCE IN NAMIBIA To						
3.	Countries to which you will be travelling: (a) (b)	: (c)	(d)							
4.	Purpose of journey (explain fully):									
I s	olemnly declare that the above particulars give	n by me are true in substance and in fact and the	hat I fully understand th	e meaning thereof.						
		Signature:	•	Č						
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 $(\mbox{N.B. Only the signature of the applicant will be accepted})$