



VISA APPLICATION FORM

PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM. FOR INSTRUCTIONS SEE THE REVERSE SIDE OF THIS FORM

1. LAST NAME		2. FIRST NAME		3. MIDDLE NAME	
4. HOME/MAILING ADDRESS				5. CITY/TOWN	
6. STATE/REGION		7. ZIP/POSTAL CODE		8. COUNTRY	
9. DAYTIME TEL.		10. EVENING TEL.		11. FAX	12. E-MAIL ADDRESS
13. PRESENT OCCUPATION <input type="checkbox"/> MEDICAL DOCTOR <input type="checkbox"/> ENGINEER <input type="checkbox"/> EDUCATOR <input type="checkbox"/> ECONOMIST <input type="checkbox"/> LAWYER <input type="checkbox"/> BUSINESS <input type="checkbox"/> OTHER				14. SPECIFIC FIELD OF STUDY/BUSINESS	
15. NATIONALITY		16. DATE OF BIRTH (Month-Day-Year)	17. CITY OR TOWN OF BIRTH		18. COUNTRY OF BIRTH
19. PURPOSE OF VISIT <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> TRANSIT <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL <input type="checkbox"/> OTHER				20. TYPE OF ENTRY <input type="checkbox"/> SINGLE <input type="checkbox"/> MULTIPLE	
21. DOCUMENT TYPE <input type="checkbox"/> PASSPORT <input type="checkbox"/> TRAVEL DOCUMENT		22. DOCUMENT NUMBER		22. DATE OF ISSUE	
23. COUNTRY OF ISSUE		24. CITY OF ISSUE		25. DATE OF EXPIRATION	
26. ESTIMATED LENGTH OF STAY (NUMBER OF DAYS)			27. EXPECTED DATE OF ARRIVAL		
28. HAVE YOU EVER BEEN TO ETHIOPIA BEFORE <input type="checkbox"/> YES <input type="checkbox"/> NO		29. HOW LONG DID YOU STAY IN ETHIOPIA? FROM: _____ TO: _____		VISA NUMBER	
30. WHAT WAS THE PURPOSE OF THE VISIT <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> TRANSIT <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL <input type="checkbox"/> OTHER				ISSUE DATE	
EMPLOYER OR SCHOOL INFORMATION					
31A. EMPLOYER OR SCHOOL NAME			31B. EMPLOYER OR SCHOOL TEL.		
31C. EMPLOYER OR SCHOOL ADDRESS					
32. YOUR NAME					
33. FATHER'S NAME		34. GRANDFATHER'S NAME		VALID UNTIL	
35A. FATHER'S FULL NAME			35B. MOTHER'S FULL NAME		
36A. COUNTRY OF BIRTH		37A. CITY OF BIRTH	36B. COUNTRY OF BIRTH		37B. CITY OF BIRTH
38A. NATIONALITY			38B. NATIONALITY		
39A. CURRENT ADDRESS			39B. CURRENT ADDRESS		
PHOTO <i>Attach one photograph Write your name on the back of the photograph</i>					

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT'S SIGNATURE: _____ DATE: _____

If this application has been prepared by a travel agency or another person on your behalf, the agent should indicate name and address of agency or person with appropriate signature of individual preparing form.

SIGNATURE OF PERSON PREPARING FORM: _____ DATE: _____