

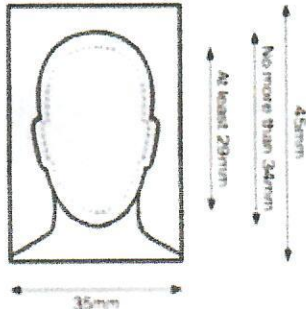


جنرال قونسلگری
جمهوری اسلامی افغانستان
دبی - امارات متحده عربی

CONSULATE GENERAL of
THE ISLAMIC REPUBLIC of AFGHANISTAN

د افغانستان اسلامي جمهوریت
جنرال قونسلگری
دبی - عربي متحده امارات

VISA APPLICATION FORM

PERSONAL DETAILS:	VISA DETAILS:
Title: _____ Date: (dd/mm/yyyy)	Visa Type: _____
Family Name: _____	Purpose of Journey: <input type="checkbox"/> Business <input type="checkbox"/> Education <input type="checkbox"/> Event <input type="checkbox"/> Employment <input type="checkbox"/> Visit Friend <input type="checkbox"/> Family <input type="checkbox"/> Holiday <input type="checkbox"/> Other:
Given Names: _____	Entry Date: (dd/mm/yyyy)
Father's Full Name: _____	Intended Duration of Stay (days): _____
Date of Birth: (dd/mm/yyyy)	Point of Entry: _____
Country of Birth: _____	Number of Children Accompanied: _____
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower	Places in Afghanistan Intended to Visit: _____
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Complete Address in Afghanistan: _____
Child: (under 18 years) <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever visited Afghanistan before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details: _____
Country of Residence: _____	Have you applied for an Afghan visa before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details: _____
Nationality: _____	Do you have a criminal record? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details: _____
Other Nationalities: _____	
CONTACT DETAILS:	PASSPORT DETAILS:
Current Address: _____	Passport Type: _____
Email Address: _____	Passport Number: _____
Mobile: _____	Place of Issue: _____
EMPLOYMENT DETAILS:	Issue Date: (dd/mm/yyyy)
Current Occupation: _____	Expiry Date: (dd/mm/yyyy)
Employers' Name: _____	I declare that the information provided in this application form is true and correct to the best of my knowledge.
Employer's Address: _____	One recent passport-size photo conforming to following requirements:
Previous Employers' Name: _____	 <ul style="list-style-type: none"> Printed in color with WHITE BACKGROUND; On matte or glossy photo-quality paper; With a size of 45 x 35 mm; The head shall be between 25 and 35 mm from the bottom of the chin to the top of the head; Since the background of your photo is in white, try not to have white cloths and not cover the head with white cloth/scarf; Taken within the last 6 months to reflect your current appearance; Taken in full-face view directly facing the camera; With a neutral facial expression and both
Previous Employer's Address: _____	
Signature: _____ (please sign within the box)	