



Islamic Republic of Afghanistan Visa Application Form

Personal Details	
Title:	
Family Name:	
Given Names:	
Father's Full Name:	
Date of Birth (Gregorian): DD / MMM / YYYY	
Country of Birth:	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widow / Widower	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Child: (Under 18 Years) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Residence:	
Nationality:	
Other Nationalities:	
Contact Details	
Current Address:	
Email Address:	
Mobile:	Work Tel:
Home Tel:	Fax:
Employment Details	
Current Occupation:	
Employer's Name:	
Employer's Address:	
Previous Employer's Name:	
Previous Employer's Address:	

Visa Details

Visa Type:

Purpose of Journey:	<input type="checkbox"/> Business	<input type="checkbox"/> Convention / Conference	<input type="checkbox"/> Education	<input type="checkbox"/> Employment
	<input type="checkbox"/> Exhibition	<input type="checkbox"/> Visiting Friends / Family	<input type="checkbox"/> Holiday	<input type="checkbox"/> Other

Entry Date:

Point of Entry:

Intended Duration of Stay (days):

Number of Children Accompanied:

Places in Afghanistan intended to visit:
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Complete Address in Afghanistan:

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Have you ever visited Afghanistan before? <i>If yes, please provide details:</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
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Have you applied for an Afghanistan Visa before? <i>If yes, please provide details:</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
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Do you have a criminal record? <i>If yes, please provide details:</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
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Passport Details

Passport Type:

Passport Number:

Place of Issue:

Issue Date:

Expiry Date:

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I declare that the information provided in this application is true and correct

<p>Signature: <i>(please sign within the box)</i></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Date: DD / MMM / YYYY</p>

<p>Passport Photograph: <i>(Please Attach Within The Square Below).</i> Note: The photograph must comply with the attached guidelines.</p>		
<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center; vertical-align: middle;"> <p><i>Please Attach Photo Here</i></p> </td> <td style="width: 50%; padding: 5px;"> <p>Guarantor must endorse the photo</p> <p><i>This is a true photo of:</i> ----- <i>(name of applicant)</i></p> <p>----- <i>(signature of guarantor)</i></p> </td> </tr> </table>	<p><i>Please Attach Photo Here</i></p>	<p>Guarantor must endorse the photo</p> <p><i>This is a true photo of:</i> ----- <i>(name of applicant)</i></p> <p>----- <i>(signature of guarantor)</i></p>
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OFFICE USE ONLY

Receiving Office:

Application Details:

Date Application Received:

Date of Application:

Visa Type:

Comments:

Observations:

Passport Details

Name:

Passport Number:

Issued By:

Visa Issued: yes no

Visa Number:

Visa Serial Number:

Issued by:

Issuing office:

Date:

Collected by / Sent to:

(note, if collected by someone other than the applicant, written authorisation must be provided by the applicant and retained on file)