



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: Business Convention / Conference Education Employment
 Exhibition Visiting Friends / Family Holiday Other

Entry Date:

Point of Entry:

Intended Duration of Stay (days):

Number of Children Accompanied:

Places in Afghanistan intended to visit:

Complete Address in Afghanistan:

Have you ever visited Afghanistan before?

 No Yes*If yes, please provide details:*

Have you applied for an Afghanistan Visa before?

 No Yes*If yes, please provide details:*

Do you have a criminal record?

 No Yes*If yes, please provide details:***Passport Details**

Passport Type:

Passport Number:

Place of Issue:

Issue Date:

Expiry Date:

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

Signature: *(please sign within the box)*

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Date:

DD / MM / YYYY

Passport Photograph: *(Please Attach Within The Square Below)*.

Note: The photograph must comply with the attached guidelines.

Please Attach Photo Here	<p>Guarantor must endorse the photo</p> <p><i>This is a true photo of:</i></p> <p>----- (name of applicant)</p> <p>----- (signature of guarantor)</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: <input type="checkbox"/> yes <input type="checkbox"/> no	
Visa Number:	
Visa Serial Number:	
Issued by:	
Issuing office:	
Date:	
Collected by / Sent to: <i>(note, if collected by someone other than the applicant, written authorisation must be provided by the applicant and retained on file)</i>	