EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR WASHINGTON D.C.

APPLICATION FOR GRATIS DIPLOMATIC / OFFICIAL COURTESY VISA

 $(\ \Box \ Diplomatic \ / \ \Box \ Official \ / \Box \ Laissez-Passer\)$

1.	Name in full (In Block Letters)				
2.	Father's Full Name		_ Recently taken		
3.	Nationality	\square 4. Sex \square (F) $/ \square$ (M)	Two color photos with full face,		
5.	Date of Birth	6. Place of Birth	front view, no hat and against a plain		
7.	Present Occupation		light background (attached with		
			staple)		
8.	Marital Status: ☐ Married ☐ Separate	ed □ Divorced □ Widowed □ Single			
9.	Spouse's Full Name:				
10.	Passport				
	(a) Number	(b) Date of Issue (dd/mm/yyyy) _	_//		
	(c) Place of issue	(d) Issuing Authority:			
	☐ United States	☐ United States, Department of	f State /		
	☐ Other:	National Passport Centre /	Other:		
	(e) Date of expiration (dd/mm/yyyy)	//			
11.	Present address in US				
12.	Contact Tel. No. (Res.)	(Work)			
13.	Address in Myanmar				
15.	Expected dt. of Arrival: (dd/mm/yyyy) / / & Departure: (dd/mm/yyyy)	/		
		ng stay in Myanmar			
17.	Attention for Applicants				
(a) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall no			r and shall not interfere		
	in the internal affairs of the Republic of the Union of Myanmar.				
	(b) Legal actions will be taken against those who violate or contravene any provision of the existing				
	laws, rules and regulations of the Republic of the Union of Myanmar.				
I h	ereby declare that I fully understan	nd the above mentioned conditions, that	the particulars given		
		ill not engage in any activities irrelevant to	o the purpose of entry		
stat	ed herein.				
Dat	e.	Signat	ure of Applicant		
		OR OFFICIAL USE ONLY)			
	a No				
	a Authority				
Pla	ce.Washington D.C, United States of		epublic of the Union		
			The state of the s		

of Myanmar, Washington D.C Contact : Tel. (202) 332 4352, (202) 238 9332 Fax.(202) 332 4351. http://mewashingtondc.com, e-mail: mewdcusa@yahoo.com)

EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR WASHINGTON D.C.

Work History for Visa Applicant

1.	Name in Full (Fill in block letters):			
	Surname (As in Passport):			
	First Name & Middle Name:			
2.	Date of birth (dd/mm/yyyy):/			
3.	Place of birth: City; Country;			
	Permanent Home Address:			
5.	Tel. (Res.)			
	(Work Place)			
	e-mail:			
6.	Work Description (Current)			
	(a) Job Title:			
	From (dd/mm/yyyy): / To (dd/mm/yyyy): / /			
	(b) Office			
	Department			
	Describe your duties:			
7.	Work Description (Previous)			
	(a) Job Title:			
	From (dd/mm/yyyy):/ To (dd/mm/yyyy)://			
	(b) Office			
	Department			
	Describe your duties:			
in	I hereby declare that the particulars given above are true and correct and that I will not engage any activities irrelevant to the purpose of my entry.			
	Signature of Applicant			
	Date: (dd/mm/yyyy) / /			

For Multiple Journey Entry Visa Applicant Only

(Note: Need the Concerned Ministry's Approval)

To	
Ambassador	
	ablic of the Union of Myanmar
Washington D.C.	
	Date:
Subject: Request for Multi	ple Journey Entry Visa
I,	, have been to the Republic of the Union or
Myanmar with Single Entry/	
Now, I would like to visit the	e Republic of the Union of Myanmar with Multiple Journey Entry Visa in
May I request to have Multip	ole Journey Entry Visa with the following documents:
(1) Completed Visa Appl	lication Form with recently taken two color photos (35 mm X 45 mm).
(2) Completed "Work Hi	story Form".
(3) The request letter of S	State Department/Ministry
(4) Original Passport	
	Sincerely,
	Signature:
	Name:
	Passport No.