of Myanmar, Washington D.C

## EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR **WASHINGTON DC**

	APPLICATION FO	JR TOURIST VISA	Two color photos with full face,
1.	Name in full (In Block Letters)		front view, no hat and against a plain
2.	Father's Full Name		
3.	Nationality	$\_$ 4. Sex $\Box$ (F) / $\Box$ (M)	staple)
5.	Date of Birth	6. Place of Birth	
7.	Occupation		
8.	Personal description		
	(a) Color of hair	(b) Height	
	(c) Color of eyes		
9.	Passport		
	(a) Number	(b) Date of issue	
	(c) Place of issue		
	(e) Date of expiry		
10.	Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Single		
11.	Spouse's Full Name		
12.	Permanent address		
13.	Address in Myanmar		
14.	Purpose of entry into Myanmar		
15.	Expected dt. of Arrival: (dd/mm/yyyy) / & Departure: (dd/mm/yyyy) / /		
16.	Attention for Applicants		
	<ul><li>(a) Applicant shall abide by the Laws of the interfere in the internal affairs of the Re</li><li>(b) Legal actions will be taken against those existing laws, rules and regulations of the existing laws.</li></ul>	epublic of the Union of Myanmar. se who violate or contravene any	provision of the
give	reby declare that I fully understand the above are true and correct and that I woose of entry stated herein.		
Date	(FOR OFFICIA	<u> </u>	of Applicant
	No		
	Authority		
Date			
	e.Washington D.C, United States of America	Embassy of the Repub	lic of the Union

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; Count	ry;			
	Permanent Home Address:				
5.	Tel. (Res.)				
	(Work Place) e-mail:				
6	. Work Description (Current)				
0.					
	(a) Job Title:				
	(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:				
	I hereby declare that the particulars given above are true a	nd correct.			
	<b>~</b>	Signature of Applicant			
	Da	te: (dd/mm/yyyy) / / /			