Embajada de la República De Guinea Ecuatorial



Embassy of the Republic Of Equatorial Guinea

2 Pictures

APPLICATION FOR VISA

1.	First Name:		
2.	Family Name: Last Name:		
3.	Date of Birth:/ (DD/MM/YYYY)		
4.	Place of Birth: City Co	ountry	
5.	Do you possess another nationality? Yes No		
6.	. If Yes, Please provide your other nationality		
7.	Type of Passport: Pa	ssport N°	
8.	Place and Date:	By:	
9.	. Expiration Date:/(DD/MM/YYYY)		
10.	O. Address at your Country of Origin:		
11.	. Current Address (If different):		
12.	2. Profession:		
13.	Occupation in current address:		
14.	Personal Phone: Wo	ork Phone:	
15.	5. Marital Status: Single Married Div	orced Widow	
16.	6. Number of people traveling with you If accompanied, provide your accompanying person's information and the type of relationship:		
17.	. Reason of the trip:		

9. Scheduled trip date to Equatorial Guinea:/ (D	D/MM/YYYY)
0. Border of entry to Equatorial Guinea:	
1. Means of transportation: Plan Ship Car Other _	
22. Schedule departure date from Equatorial Guinea://(DD/MM/YYYY)	
23. Address in Equatorial Guinea: Street Province	
24. Have you ever been in Equatorial Guinea? Yes No	
25. If Yes: Trip date/(DD/MM/YYYY) Places V	isited
Reasons of your trip	
26. Do you intend to work in Equatorial Guinea? Yes No	_
27. If yes, provide your employer and your working permit information and the second s	tion:
28. Do you have any relatives in Equatorial Guinea? Yes No	_ If Yes,
28. Do you have any relatives in Equatorial Guinea? Yes No provide your relatives information: 29. If you are an Equatorial Guinean resident, provide a copy of yo	If Yes, ur valid Residen

and consumption of drugs? Say When and where:
34. Have you been to court and convicted for other crime or crimes? YesNo in affirmative case, say who, when and where:
I CERTIFY: That I have read and understood all the questions contained in this application form and that the answers provided are accurate. In consequence, I understand that any falsehood, omission or misrepresentation might motivate the negation of the requested visa even if the falsehood was discovered after the visa has been issued to me. Furthermore, any misrepresentation or falsehood of the information provided might cause the cancellation of my visa and exercise of in force law for this offense.
Signature:
Date:/
IMPORTANT NOTICE: This request must be submitted with the precedence of one week (7 days) by the petitioner. If presented by another person, it will have to contain, nevertheless, the signature of the person concerned as well as a written document authorizing the intermediary to submit the request in his name.
FOR THE USE OF THE EMBASSY/CONSULAR SERVICE ONLY Granted Visa Number Class Date:/ Authorized by virtue of
OBSERVATIONS
Beijng,/ THE FIRST SECRETARY, IN CHARGE OF CONSULAR AND ADMINISTRATIVE MATTERS

Approved: THE AMBASSADOR