



THE REPUBLIC OF UGANDA
VISA APPLICATION

SERIAL NO. (For official use only; please do not write in this space)

1. Family Name:

2. Other names:

3. Former Name(s):

4. Address/Telephone

a. Permanent Address:
.....

b. Present Address:
.....

c. Telephone No (s): Home: (.....) Work: (.....)

d. E-mail:

5. Nationality

6. Date and Place of Birth
Day/Month/Year Place

7. Marital Status: (check/tick one): ☐ Married ☐ Single ☐ Divorced

8. Other family members accompanying applicant: (complete appropriate line/s)

Name	Date of Birth	Place of Birth
Spouse.....		
Child.....		
Child.....		
Child.....		

9. Passport No:..... Issued at:..... On.....

Type (check/tic one) ☐ Diplomatic ☐ Official ☐ Ordinary

10. Type of Visa required (check/tick one)

☐ Transit ☐ Single Entry ☐ Multiple Entry (Six Months) ☐ Multiple Entry (12 Months)

11. Proposed Date of Arrival:
Day/Month/Year

Duration of Stay:

9. Reason for Journey:

10. Date(s) of any Previous Visit(s):

a. If in transit, ultimate destination:

b. Has a VISA been obtained for Country of Destination?

11. Any contact person in the Country of which VISA is applied:

a. Name(s):
First Last

b. Phone:

12. The full address in Uganda where you intend to stay:
.....

Applicant(s) Signature: Date:20.....