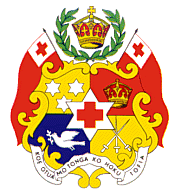
**FEES FOR APPLICATIONS**

**Receipt No.**



**K I N G D O M O F T O N G A**

**A PP L I C A T I O N FOR A T O N G A N P E R M I T**

**IMMIGRATION ACT**

*Please print all details legibly in ink*

|  |  |
| --- | --- |
| **1** | **PERMIT DETAILS** |
| *How many people are included on this application (including yourself )?*  *Which class of permit are you applying for?*  *Visitor Temporary Tongan Parent Government*  *Which category of permit (e.g. business, employment,*  *Student, residency, etc)* |
| **2** | **PERSONAL DETAILS** |
| Surname as shown Given names as  In your passport shown in your  Passport  Other names you  *Day month year*  Are known by Date of birth  *Place of birth Country of birth*  Gender Male Female  Marital status *Single Married Widowed Divorced* |
|  | **Passport Details**  Passport number Place of Issue  Expiry date *day month year* Nationality |
| **Occupation**  **(Attach qualifications please)**  Date of First Entry into Tonga    How long have you been in Tonga |

**CONTACT DETAILS**

**3**

Postal address Phone /day

For

Correspondence Phone / night

**1**

Email

Fax

Intended address in Tonga

**Relationship to** Category of

**DEPENDENT**

**4**

**Principal**  required permit

**Applicant?**

Surname Given Names

Gender Male Female Date of birth

Place of Birth Country of birth

**Passport details**

**Passport number** Place of Issue

Expiry Date Nationality

**Relationship to**

**Principal**  Category of

**Applicant?** Required permit

Surname Given Names

Gender Male Female Date of birth

Place of Birth Country of birth

**Passport details**

Passport number Place of issue

Expiry Date Nationality

**Relationship to**

**Principal**  Category of

**Applicant?** Required permit

Surname Given Names

Gender Male Female Date of birth

Place of Birth Country of birth

**Passport details**

Passport number Place of issue

Expiry Date Nationality

**CHARACTER REFERENCES**

**5**

*Complete this section if you are applying to reside in Tonga for more than 6 months*

**Reference 2**

**Reference 1**

Name

Telephone & Fax number

Occupation

Postal address

**2**

How does referee know the applicant?

E-mail address

Work address

**2**

*In the case of very person aged 16 and over who is applying for any category of permit other than a visitor’s permit, police certificate or Police report on the applicant must be attached from every country the applicant has remained in for an aggregate period of 6 months during the last 5 years preceding their current application.*

*Complete this section if you are applying in Tonga for more than 6 months*

**6**

**POLICE RECORD**

**7**

**HEALTH REQUIREMENTS**

*Complete this section if you applying to reside in Tonga for more than 6 months*

*Please attach a relevant medical form which can be obtained from the visa section, for the principal applicant*

*(and for any person included on this form who is over the aged of 18). The form should be completed and signed*

*by a medical officer overseas, or if applicant is in Tonga the medical form should be signed and completed by*

*one of the doctors specified by the Principal Immigration Officer.*

**CONSENT FOR THE CHILD’S APPLICATION**

**8**

*Complete this section if the application is for a child. Please note consent can only be given by a parent or legal guardian.*

Name of Consent giver:

If the applicant is for a child or includes a child or

Children: I consent to the issue of a visa to the child

or children named in section 1 and/or section 5

*Signature of Consent Giver*

Proof of relationship to child

Parent as named on birth certificate Legal papers showing guardianship

**9**

**DECLARATION**

I, the undersigned hereby apply for the issue of a permit and do hereby declare:-

* That I have not been previously removed or otherwise lawfully sent out of the Kingdom or any other country;
* That I have not been repatriated to the country of my nationality by the Government of Tonga;
* That I shall at all times whilst in the Kingdom have sufficient means of supporting myself and my family and (dependent), if any;
* I shall not become a pauper or a change on the public;
* That I shall, if requested by an immigration officer, submit to an examination by a Government medical officer approved by the Principal Immigration Officer or undergo, or assist in the carrying out of, any test or investigation which such medical officer may require;
* That I do not suffer from a contagious or infectious disease which makes my presence in the Kingdom dangerous to the community;
* That I or any person included in this form has not been convicted by a court in any country outside the Kingdom of an offence which;

1. is punishable by death or imprisonment for a term of not less than 2 years in the country of conviction
2. if committed within the Kingdom, would be punishable by death or imprisonment for a term of not less than 2 years.

* That I am under obligation to inform the Principal Immigration Officer or Immigration Officer of any change of status or address including any material change in circumstances that occurs after the application is made, if that fact or change in circumstances, may:

1. Affect the decision on the application: or
2. Affect of alter the conditions of my original permit;

* That I am not a prostitute, nor a person who has lived on or received prior to entering the Kingdom, the proceeds of prostitution;
* If my permit is granted, I shall uphold and comply with any of the conditions and restrictions imposed thereon;
* If my permit is granted, I shall uphold all the laws currently in force in the Kingdom;
* The contents and information provided by me in this form and in all my attachments are complete, true and correct;
* That the Principal Immigration Officer is authorized to make any inquiries on me or any person included in this application, of any person who may be able to provide personal information or otherwise on matters which I have disclosed and which the Principal Immigration Officer may deem necessary in respect of information provided on this form in order to make a decision on this application.

I understand that failure to comply with any of the above declarations may (1) render any permit application to be refused or (2) where a permit has been granted, such permit shall be subject to cancellation or revocation and that I shall be removed from the Kingdom or prosecuted under the Immigration Act and subject to term of imprisonment or fine or both.

Date

Date

Date

Signature 3

Signature 2

Signature 1

**3**

PLEASE NOTE THAT A VISITOR’S PERMIT IS NOT TRANSFERABLE TO ANY OTHER FORM OF PERMIT WHISLT THE APPLICANT IS IN THE KINGDOM, UNLESS IMMIGRATION HAVE BEEN INFORMED OF THE APPLICANT’S INTENTION PRIOR TO HIS ARRIVAL IN THE KINGDOM AND IMMIGRATION HAS GRANTED PERMISSION FOR SUCH TRANSFERRAL.

**COMMENTS (FOR OFFCIAL USE ONLY)**

**IMMIGRATION DIVISION**

**MINISTRY OF FOREIGN AFFAIRS**

**Visa & Naturalization Section**

**P.O. Box 821**

**Salote Rd**

**Nuku’alofa**

**Tel: (676) 26970 / 26969 /27821 Fax: (676) 26971 / 26972**

**Email: visatonga@yahoo.com**

**4**