

# CONSULATE GENERAL OF THE FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA

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## VISA APPLICATION FORM

### APPLICANT

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Sex \_\_\_\_\_ Birth Date (DD/MM/YY) \_\_\_\_\_ Birth Place \_\_\_\_\_  
Present Nationality \_\_\_\_\_ Any Other \_\_\_\_\_  
Passport Type : ☐ Ordinary ☐ Service Diplomatic ☐ Alien ☐ Others Specify \_\_\_\_\_  
Passport Number \_\_\_\_\_ Issue Date(DD/MM/YY) \_\_\_\_\_ Expiry Date (DD/MM/YY) \_\_\_\_\_  
Address Country \_\_\_\_\_  
City \_\_\_\_\_ Street Name & No \_\_\_\_\_ P.O. Box \_\_\_\_\_  
Tel. \_\_\_\_\_ Email Id \_\_\_\_\_  
Mobile\* : \_\_\_\_\_

### CHILDREN / DEPENDENTS ON THE SAME PASSPORT

First Name	Middle Name	Last Name	Sex	Birth Date	Birth Place
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____

### CURRENT REQUEST

Place of Request \_\_\_\_\_ Request Visa Type \_\_\_\_\_ Duration (Days) \_\_\_\_\_  
Entries : ☐ Single ☐ Double ☐ Multiple Number of Supporting Docs. \_\_\_\_\_  
Purpose of visit : Business ☐ Investment ☐ Employment ☐ Tourist ☐  
Type of Business \_\_\_\_\_ Company Name \_\_\_\_\_  
Type of Employment \_\_\_\_\_ Employer/ Company Name \_\_\_\_\_  
Any Other \_\_\_\_\_

### TO BE FILLED BY PROXY / GUARDIAN

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_ Sex \_\_\_\_\_ Contact Person/Organization \_\_\_\_\_  
Country \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_

I the undersigned declare that all the above mentioned statements are true to the best of my knowledge.

Full Name and Signature \_\_\_\_\_

Request Date \_\_\_\_\_

### FOR OFFICE USE ONLY

Visa No. \_\_\_\_\_ Visa Type \_\_\_\_\_  
Place of Issue MUMBAI Date of Issue \_\_\_\_\_ Date of Expiry \_\_\_\_\_  
Address in Ethiopia : Hotel \_\_\_\_\_ Tel. \_\_\_\_\_ Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

### RECEIPT

Name of the Person / Company : \_\_\_\_\_  
Demand Draft No. / s. : \_\_\_\_\_  
Total amount : \_\_\_\_\_  
Receipt No. : \_\_\_\_\_ Dated : \_\_\_\_\_  
Purpose of visit : \_\_\_\_\_