



**THE PERMANENT MISSION OF THE UNITED REPUBLIC OF
TANZANIA TO THE UNITED NATIONS**

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FOR OFFICIAL USE ONLY

GRR NO. _____

VISA NO. _____

Ref. NO. _____

**VISA APPLICATION
FORM**

(Visa Regulations on the next page)

2 Passport Size
Photograph
Size: 2x2
Do not paste or
Staple

1. Surname or Family Name (Mr./Mrs./Miss/Ms/Dr./Prof.) _____
First Names in Full _____
Former or Maiden Name (if different from above) _____
2. Date of Birth (DD/MM/YY) _____ Sex (M/F) _____
3. Place of Birth _____ Country of Birth _____
Current Nationality (State if Dual Nationality) _____
Nationality at Birth _____
4. Marital Status (Mark): ___ Single ___ Married ___ Divorced ___ Widowed ___ Legally
Separated.
5. Passport No. _____ Date Issued _____ Valid until

Issued At _____ Issuing Authority _____
6. Profession/Occupation _____
Employer Address: _____
7. Current Address _____
Tel. _____ Fax _____ E-mail _____
8. Name of Travel Agent/Tour Operator _____
9. Contact Person(s) in Tanzania _____
Address _____

10. Date of Entry_____ Departure Date_____
Duration of Stay_____ (Max. 90 Days)

Type of Visa Requested Travel Visa Transit Visa

11. **Purpose of visit**

- | | | |
|--|-------------------------------------|---|
| <input type="checkbox"/> Leisure, Holiday | <input type="checkbox"/> Other | <input type="checkbox"/> Business Various |
| <input type="checkbox"/> Visiting friends, relatives | <input type="checkbox"/> Diplomatic | <input type="checkbox"/> Mission |
| <input type="checkbox"/> Meeting, Conference | <input type="checkbox"/> Study | <input type="checkbox"/> Transit |
| <input type="checkbox"/> Health Treatment | <input type="checkbox"/> Official | <input type="checkbox"/> Same day visitor |

12. Requested Number of Entries: _____ Single _____ Double _____ Multiple.

13. In Case of Transit: Do you have an Entry Permit for the Final Country of Destination?
_____ No _____ Yes Valid Until: _____

14. Budget Available For Your Stay_____

15. I Hereby Declare That The Information Stated Above Is True And Correct :

Signature of Applicant_____ **Date**_____