

1625 K Street NW Suite 750 Washington DC 20006 Tel: 888 838 4867 ♦ Email: AHI@PinnacleTDS.com

Visa requirements shown below are for U.S. & CANADIAN PASSPORT HOLDERS ONLY. Nationals of all other countries please contact Pinnacle Travel Document Systems directly for specific requirements associated



Myanmar

March 15 - 30, 2017

Visa(s)	#	#	Cost	
Req'd	Forms	Photos	1 – Persons - 2	
Myanmar	3	2	\$149.00	\$268.00

Application	Expedite Fee
Deadline	Per Person
January 24, 2017 (or 50 days prior to your departure)	\$40.00

All visas will be issued for single entry.

Please use enclosed sample information verbatim and substitute your personal information.

Fees shown above include all necessary consular and service fees as well as the cost to ship your passport(s) back from our offices via FedEx within the continental U.S. (Please add \$30.00 to cover extra shipping costs for addresses in Alaska, Hawaii, or Canada.) We strongly suggest that you send your documents to us via FedEx or some other form of traceable overnight courier service.

Please enclose your actual passport along with two (2) photographs, two (2) completed visa application forms and one (1) completed Work History form. (Residents of AK, AZ, CA, NV, NM, OR, WA & HI must complete application form A. Residents of all other states must complete application form B. Please refer to your specific application sample when completing your documents.) Please also enclose two (2) clear photocopies of the vital information page of your passport, a copy of your flight itinerary showing entry and exit to Myanmar and your internal travel itinerary obtained from your tour operator. Photographs should be recently shot passport-type photos with a clear background approximately 2" x 2" in dimension. (Note that machine or home photographs are not acceptable.) Your passport must be valid for a minimum of six (6) months beyond the completion of your international travel and must have at least three (3) blank unused pages available not including those reserved for amendments and endorsements at the back of your passport. Contact PTDS directly for assistance with renewal of your U.S. passport, as this can easily be done at the same time you apply for your visas.

Applications should be received in our offices no fewer than 50 days prior to your departure from your shipping address or by January 24, 2017, whichever is sooner. Documents received after the deadline will be subject to the *per person* expediting fee shown above. (Please do not send your documents more than 90 days prior to the departure of your tour due to limited validity of the visa for Myanmar.) Special requests for passports to be expedited due to other travel plans prior to your tour departure may also require expediting fees. If you have international travel between the deadline above and the departure of your tour you may need to obtain a second passport in order to accommodate your travel. Please contact PTDS directly regarding any special processing needs or before submitting documents you expect may be received substantially after the deadline as there may be special requirements and/or additional fees to process your request. It may not be possible to cancel processing of your applications once they have been submitted.

Please note that consular fees, shipping fees and application requirements are subject to change without notice. Check or credit card payment accepted. Credit card payment subject to 3.5% surcharge.





PLEASE BE CERTAIN TO RETURN THE FOLLOWING TO:

Pinnacle Travel Document Systems 1625 K Street NW Suite 750 Washington DC 20006



- Your actual passport (Please keep a photocopy for your records.)
- ◆ This completed form
- Two (2) photocopies of the vital information page of passport
- ◆ Two (2) completed visa application forms *per person* for Myanmar
- One (1) completed Work History form per person for Myanmar
- One (1) copy of your flight itinerary showing entry and exit for Myanmar
- One (1) copy of your internal travel itinerary obtained from your tour operator
- Two (2) passport-type color photographs per person (Please leave loose, PTDS will affix.)
- Credit or debit card authorization below

PLEASE PRINT CLEARLY		
Full Name (1):	Full Name (2):	
Passport #: Exp:/	Passport #: Exp:/	
Home	Home Tel:	
Mailing	Work Tel:	
Address:	Email:	
(FedEx cannot deliver to PO boxes)	Date of Departure from Home: Month / Day / Year -	
Address	Tour Name: Myanmar	
For the	Date of Tour Departure: 03 / 15 / 17 Month Day Year	
Return of	Special Instructions:	
Passport:		
Tel:		
Please indicate below if there are known periods prior for another international trip or when you will not be	r to your tour during which you will need your passport available to sign for the return of your passport.	
I will need my passport(s) for other international trave	elfrom//to/// 	
I will not be at my home and/or return shipping addres		
CREDIT CARD AUTHORIZATION: AMEX / VISA / MC		
Cardholder Name: Signature:	Billing Zip Code:	
Card #:CID#	Expires: Amount US\$	
FOR OFFICE USE ONLY AHI MYANMAR 0315-17 (Myanmar25)79 FX 30 149/268 (APP FEE)15 3PGS VAL6MOS DL 01/24/17 40.00 3.5% TE MYANMAR 17 DECEMBER 2016 ENTER MYANMAR 17 MARCH 2017 ©2017 Pinnacle Travel Document Systems		

ONLINE ORDER COMPLETION & AUTOMATED UPDATES:

If you have not already done so please complete your order online. This will allow you to create an inbound FedEx shipping label to securely send your documents to us and pay all required fees online. This will also allow you to receive automated email updates regarding the progress of your documents. Please locate and click on the name or number of your specific program at the link below to complete your order.

www.PinnacleTDS.com/AHI

IMPORTANT NOTICE - PASSPORT PAGES & VALIDITY:

You must have at least three (3) blank unused pages available in your passport for visas and entry/exit stamps. In addition, your passport must be valid for six (6) months beyond the completion of your international travel. If you are a U.S. citizen and do not have the adequate number of pages or validity you will need to renew your passport since the U. S. Passport Agency will no longer add pages. Pinnacle Travel Document Systems can easily assist you with this at the same time your visas are being processed. The total additional fees for this service (including U.S. government expediting fee) is \$264.00 for passport renewals and second passports. We can also assist you with expediting first time passport applications.

You will need to complete an application form and a letter of authorization for PTDS and must send your actual passport to us. Specific requirements and the necessary forms are available for download from our Internet site:

Passport Renewals
First Time Passports
Second Passports
www.Traveldocs.com/PTDSPassports

You may also contact us at AHI@PinnacleTDS.com or 888-838-4867 and we will send you an instruction kit.

Visa is valid for 3-months from the date of Issue

Copy No. 2

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR

3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

	APPLICATION FOR TOURIST VISA	Official use only
1.	Name in Full (Fill in Block Letters)	E.V.T (F.I.T) E.V.T (Package Tour)
	JOHNATHAN / BONHAM / DOE	D.V.1 (Fackage Tour)
	(First Name) (Middle Name) (Last Name)	9
2.	Father's Full Name JOHANN / SEBASTIAN / DOE	- РНОТО
	(First Name) (Middle Name) (Last Name)	111010
3.	Date of Birth (dd/mm/yy): 13 / 03 / 1961	Recently taken
4.	Place of Birth (City/State/Country) LOS ANGELES / CALIFORNIA / USA	_ color photo
5.	Nationality: Q U.S./ Q (Others):4. Sex Q (F) / Q (M)	
6.	Present Occupation: ENGINEER	with full face, front view,
	(If retired write "retired", if student write "student")	no hat and against
7.	Marital Status: Married Separated Divorced Widowed Single (Never Married)	a plain light background
8.	Spouse's Full Name: JOANNA BACH DOE	
	Personal Description	
9.	(a) Color of Hair BROWN (b) Height: Im cm / If 6 in. 5	
1.	(c) Color of Eyes BLUE (d) Complexion CAUCASIAN	- / / }
	Passport	14
10		
10.	(a) Number 987654321 (b) Date of Issue (dd/mm/yy) 12 / 06 / 2010	
	(c) Date of Expiration (dd/mm/yy) 11 decomposition (dd/mm/yy) 10 decomposition (dd/mm/yy) 11 decomposition (dd/mm/	
	(d) Place of Issue: (e) Issuing Authority:	
	United States, Department of State/	
	Other: National Passport Center/ Other:	
11.	Present Address in U.S. 1234 MAIN STREET, ANYWHERE CALIFORNIA USA	
	(Include apartment number, street, city, state or province & postal-zone)	
12.	Contact Ph. No.(Res:)(999) 888-7777 (Work)() N/A (Cell)(999) 666-3333	e-mail JDOE@ABC.COM
	Address in Myanmar: Mandalay Hill Resort #9 Kwin 10th St. Mandalay, Myanmar	<u> </u>
	Have you ever been to Myanmar: DYes DNo (If Yes) Date of Last Visit: (dd/mm/yy)	1
	Have you ever been refused to enter Myanmar: Yes No (If Yes) When: (dd/mm/yy)	1
15.	Why: PLEASE CONTACT PTDS IF YES	
16	Purpose of Visit: Tourism/PRE PAID TOUR WITH AHI TRAVEL	
10.		/ 47 Di 1:31 Di
	\ / / 55 /	уу
Au	tention for Applicant:	
	(a) Apart from the professions mentioned this visa application from applicants are not to engineering without charges.	
	(b) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not in	nterfere in the Internal Affairs of
	the Republic of the Union of Myanmar.	terrere in the internal Arians of
	(c) Legal action will be taken against those who violate or contravene any provision of the exist	ng lawe rules and regulations of
	the Republic of the Union of Myanmar.	ing laws, rules and regulations of
	I hereby declare that I fully understand the above mentioned conditions, that the partic	ulars given above one tour and
	correct and that I will not engage in any activities irrelevant to the purpose of entry stat	ad havein
	correct difference is with not ongage in any activities in televant to the purpose of entry state	ed Herein.
-	DI EAGE DO NOT FORGET TO GION AND DATE ALL ARRIVA	CATION FORMS
, t	PLEASE DO NOT FORGET TO SIGN AND DATE ALL APPLI	CATION FORMS
		signature of Applicant
	Date (dd/m	m/yy)//
-	(FOR OFFICE USE ONLY)	
Vi	sa No Date:	
Vi	sa Authority: MOFA Lt. No. 46 11 11 (76) Dated: 11 March 1994	
	other): MOFA Lt. No, Date:	
N.	, , , , , , , , , , , , , , , , , , , ,	
	Q	gnature of Officer in -Charge

A

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

Work History for Visa Applicant

1.	Name in Full (Fill in block letters): JOHNATHAN BONHAM DOE			
	Surname (As in Passport): DOE			
	First Name & Middle Name: JOHNATHAN BONHAM			
2.	Date of birth (dd/mm/yy) 13 / 1961			
3.	Place of birth: U.S., LOS ANGELES, CA (Other):			
4.	. Permanent Home Address: 1234 MAIN STREET, ANYWHERE CALIFORNIA USA 98765			
5.	Tel. (Res.)(999) 888-7777 (Work Place) () NOT APPLICABLE			
	(Cell) (999) 666-3333 e-mail: JDOE@ABC.COM			
6.	Work Description (Current)			
	(a) Job Title: ENGINEER			
	From (dd/mm/yy) 09 / 06 / 2000 To(dd/mm/yy) 08 / 09 / 2015			
	(b) Office ENGINEERING			
	Department ENGINEERING			
	Describe your Duties: ENGINEERING			
7.	Work Description (Previous)			
	(a) Job Title: PRODUCTION MANAGER			
	From (dd/mm/yy) 12 10 / 1990 To(dd/mm/yy) 08 / 06 / 2000			
	(b) Office PRODUCTION			
	Department_PRODUCTION			
	Describe your Duties: PRODUCTION			
	I hereby declare that the particular given above are true and correct and that I will not engage in any			
act	civities irrelevant to the purpose of my entry.			
	PLEASE DO NOT FORGET TO DATE AND SIGN ALL APPLICATIONS			
	Signature of Applicant			
9-3100-00	Date:(dd/mm/yy)//			

Copy No. 1

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010

TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042 Official use only APPLICATION FOR TOURIST VISA □ E.V.T (F.I.T) 1. Name in Full (Fill in Block Letters) ☐ E.V.T (Package Tour) (Middle Name) (First Name) Father's Full Name РНОТО (First Name) (Middle Name) Date of Birth (dd/mm/yy): / / Recently taken Place of Birth (City/State/Country)___/ color photo Nationality: **1** U.S./ **1** (Others): _______4. Sex **1** (F) / **1** (M) 5. 6. Present Occupation: with full face, front view, (If retired write "retired", if student write "student") no hat and against a plain light background Spouse's Full Name: Personal Description 9. (a) Color of Hair ______(b) Height: 0 m _____ cm ___ / 0 ft _____ in. _____ Passport Passport

10. (a) Number (b) Date of Issue (dd/mm/yy) ____/___/

(c) Date of Expiration (dd/mm/yy) ____/___/ (d) Place of Issue: United States, _____United States, Department of State/ □ National Passport Center/ □ Other: Other: 11. Present Address in U.S. (Include apartment number, street, city, state or province & postal zone) 12. Contact Ph. No.(Res:)(____)___(Work)(___)___(Cell)(___)_
13. Address in Myanmar: Mandalay Hill Resort #9 Kwin 10th St. Mandalay, Myanmar 14. Have you ever been to Myanmar: Tyes No (If Yes) Date of Last Visit: (dd/mm/yy) ____/ 15. Have you ever been refused to enter Myanmar: Tyes Tho (If Yes) When: (dd/mm/yy) 16. Purpose of Visit: Tourism/ PRE-PAID TOUR WITH AHI TRAVEL (Expected date of Arrival: 17 /03 /17 Flight No. & Departure: 30 /03 /17 dd dd mm yy Attention for Applicant: (a) Apart from the professions mentioned this visa application from applicants are not to engage in any sort of work, with or without charges. (b) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not interfere in the Internal Affairs of the Republic of the Union of Myanmar. (c) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Republic of the Union of Myanmar. I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein. Signature of Applicant Date (dd/mm/yy) ____/__/ (FOR OFFICE USE ONLY)

Signature of Officer in -Charge

Consulate-General of the Republic of the Union of Myanmar, Los Angeles, U.S.A

Contact: Tel (213) 387-0041, (213) 387-0043, Fax (213) 387-0042, e-mail: myancgla@gmail.com

Visa Authority: MOFA Lt. No. 46 11 11 (76) Dated: 11 March 1994 (If other): MOFA Lt. No.______, Date:

Visa No.

Copy No. 1

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010

TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042 Official use only APPLICATION FOR TOURIST VISA □ E.V.T (F.I.T) 1. Name in Full (Fill in Block Letters) ☐ E.V.T (Package Tour) (Middle Name) (First Name) Father's Full Name РНОТО (First Name) (Middle Name) Date of Birth (dd/mm/yy): / / Recently taken Place of Birth (City/State/Country)___/ color photo Nationality: **1** U.S./ **1** (Others): _______4. Sex **1** (F) / **1** (M) 5. 6. Present Occupation: with full face, front view, (If retired write "retired", if student write "student") no hat and against a plain light background Spouse's Full Name: Personal Description 9. (a) Color of Hair ______(b) Height: 0 m _____ cm ___ / 0 ft _____ in. _____ Passport Passport

10. (a) Number (b) Date of Issue (dd/mm/yy) ____/___/

(c) Date of Expiration (dd/mm/yy) ____/___/ (d) Place of Issue: United States, _____United States, Department of State/ □ National Passport Center/ □ Other: Other: 11. Present Address in U.S. (Include apartment number, street, city, state or province & postal zone) 12. Contact Ph. No.(Res:)(____)___(Work)(___)___(Cell)(___)_
13. Address in Myanmar: Mandalay Hill Resort #9 Kwin 10th St. Mandalay, Myanmar 14. Have you ever been to Myanmar: Tyes No (If Yes) Date of Last Visit: (dd/mm/yy) ____/ 15. Have you ever been refused to enter Myanmar: Tyes Tho (If Yes) When: (dd/mm/yy) 16. Purpose of Visit: Tourism/ PRE-PAID TOUR WITH AHI TRAVEL (Expected date of Arrival: 17 /03 /17 Flight No. & Departure: 30 /03 /17 dd dd mm yy Attention for Applicant: (a) Apart from the professions mentioned this visa application from applicants are not to engage in any sort of work, with or without charges. (b) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not interfere in the Internal Affairs of the Republic of the Union of Myanmar. (c) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Republic of the Union of Myanmar. I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein. Signature of Applicant Date (dd/mm/yy) ____/__/ (FOR OFFICE USE ONLY)

Signature of Officer in -Charge

Consulate-General of the Republic of the Union of Myanmar, Los Angeles, U.S.A

Contact: Tel (213) 387-0041, (213) 387-0043, Fax (213) 387-0042, e-mail: myancgla@gmail.com

Visa Authority: MOFA Lt. No. 46 11 11 (76) Dated: 11 March 1994 (If other): MOFA Lt. No.______, Date:

Visa No.



CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

Work History for Visa Applicant

1.	Name in Full (Fill in block letters):
	Surname (As in Passport):
	First Name & Middle Name:
2.	Date of birth (dd/mm/yy)//
3.	Place of birth: • U.S., • (Other):
4.	Permanent Home Address:
5.	Tel. (Res.)()(Work Place) ()
	(Cell) (e-mail:
6.	Work Description (Current)
	(a) Job Title:
	From (dd/mm/yy)/To(dd/mm/yy)//
	(b) Office
	Department
	Describe your Duties:
7.	Work Description (Previous)
	(a) Job Title:
	From (dd/mm/yy)/
	(b) Office
	Department
	Describe your Duties:
act	I hereby declare that the particular given above are true and correct and that I will not engage in any tivities irrelevant to the purpose of my entry.
	Signature of Applicant Date:(dd/mm/yy) / /
9.70002	

GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR MINISTRY OF IMMIGRATION AND POPULATION

DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION IMMIGRATION DEPARTMENT APPLICATION FOR ENTRY TOURIST VISA

РНОТО

12	IOUNATUAN BONU	AM DOE
1.	Name in full (In Block Letters) JOHNATHAN BONH	AIVI DOE
2.	Father's Name in full JOHANN SEBASTIAN DOE	MALE
3.	Nationality_USA	4. Sex MALE
5.	Date of Birth MARCH 13, 1961	6. Place of Birth LOS ANGELES, CA
7.	Occupation_ ENGINEER	
8.	Personal description	
	(a) Color of hair BROWN	(b) Hight 6 FEET 2 INCHES
	(c) Color of eyes BLUE	(d) Complexion CAUCASIAN
9.	Passport	
	(a) Number 9876543210	(b) Date of issue JANUARY 24, 2010
	(c) Place of issue US DEPT OF STATE	(d) Issuing Authority DEPT OF STATE
	(e) Date of expiry_JANUARY 23, 2020	
10.	Permanent address 1234 MAIN STREET ANYWHERE	
11.	Address in Myanmar Mandalay Hill Resort #9 Kwin 10	
12.	Purpose of entry into Myanmar TOURISM - PREPA	D TOUR WITH AHI TRAVEL
13.	Attention for Applicants	
partic	(a) Applicant shall abide by the Laws of the Republ not interfere in the internal affairs of the Republ (b) Legal actions will be taken against those who ver the existing laws, rules and regulations of the Reby declare that I fully understand the about lars given above are true and correct and that want to the purpose of entry stated herein. PLEASE DO NOT FORGET TO SIGN A	ic of the Union of Myanmar. iolate or contravene any provision of epublic of the Union of Myanmar. ve mentioned conditions, that the t I will not engage in any activities
	Date	Signature of Applicant
Company Cont	(FOR OFFICIAL USE O	ONLY)
Vice N	I a	Data
Visa P	No Authority	Date
Date_Place	Washington D.C, United States of America	Embassy of the Republic of the Union Of Myanmar, Washington D.C

Embassy of the Republic of the Union of Myanmar Washington D.C.

Work History for Visa Applicant

1. Name in Full (Fill in block letters): JOHNATHAN BONHAM DOE

Surname (As in Passport): DOE

	First Name & Middle Name: JOHNATHAN BONHAM	
2.	2. Date of birth (dd/mm/yyyy) 13 / 03 / 1961	
	8. Place of birth: U.S., LOS ANGELES, CA	
4.	Permanent Home Address: 1234 MAIN STREET ANYWHERE, CA USA	
5.	6. Tel. (Res.) (999) <u>888-7777</u> (Work Place) (994) <u>888-6666</u> e-mail: <u>JDOE@ANYWHERE.COM</u>	
6.	Work Description (Current)	
	(a) Job Title : ENGINEER	
	From(dd/mm/yyyy): 09 /07 /2005 -To (dd/mm/yyyy) 06 /25 /2014 (b) Office ENGINEERING	
	Department ENGINEERING	
	Describe your Duties: ENGINEERING	
7.	V. Work Description (Previous)	
	(a) Job Title: PRODUCTION MANAGER	
	From (dd/mm/yyyy) 12 / 10 / 1990 To (dd/mm/yyyy) 09 / 07 / 2005	
	(b) Office PRODUCTION	
	Department PRODUCTION	
	Describe your Duties: PRODUCTION	
	I hereby declare that the particulars given above are true and correct and that I will not engage in	anv
act	activities irrelevant to the purpose of my entry.	arry
40	ientification in a parpesse of my only.	
	PLEASE DO NOT FORGET TO SIGN AND DATE YOUR APPLICATION	N
	Signature of Ap	•
	Date: (dd/mm/yyyy) / /	
Up	lp Dated : May, 2014	

GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR MINISTRY OF IMMIGRATION AND POPULATION

DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION IMMIGRATION DEPARTMENT APPLICATION FOR ENTRY TOURIST VISA

РНОТО

1.	Name in full (In Block Letters)	
2.	Father's Name in full	
3.		
5. 5.	Nationality	4. Sex
7.	Date of Birth Occupation	o. Hace of Birth
8.	Personal description	
0.		(h) Hight
	(a) Color of hair	(b) Hight(d) Complexion
9.	(c) Color of eyes	(d) Complexion
7.	Passport (a) Number	(b) Date of issue
	(a) Number	
	(c) Place of issue	(d) Issuing Authority
10.	Permanent address	
11.	Address in Myanmar Mandalay Hill Resort #9 Kwi	n 10th St. Mandalay, Myanmar
12.	Purpose of entry into Myanmar TOURISM - PRE	
13.	Attention for Applicants	
partic	not interfere in the internal affairs of the Rep (b) Legal actions will be taken against those whether the existing laws, rules and regulations of the reby declare that I fully understand the evaluars given above are true and correct and want to the purpose of entry stated herein. Date	o violate or contravene any provision of e Republic of the Union of Myanmar. above mentioned conditions, that the
CONTRACTOR CONTRACTOR	Date	~ Summer of a spp
	(FOR OFFICIAL US	E ONLY)
Visa N	No.	Date
Visa A	NoAuthority	
Date_		
Place	Washington D.C, United States of America	Embassy of the Republic of the Union Of Myanmar, Washington D.C

GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR MINISTRY OF IMMIGRATION AND POPULATION

DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION IMMIGRATION DEPARTMENT APPLICATION FOR ENTRY TOURIST VISA

РНОТО

1.	Name in full (In Block Letters)	
2.	Father's Name in full	
3.		
5. 5.	Nationality	4. Sex
7.	Date of Birth Occupation	o. Hace of Birth
8.	Personal description	
0.		(h) Hight
	(a) Color of hair	(b) Hight(d) Complexion
9.	(c) Color of eyes	(d) Complexion
7.	Passport (a) Number	(b) Date of issue
	(a) Number	
	(c) Place of issue	(d) Issuing Authority
10.	Permanent address	
11.	Address in Myanmar Mandalay Hill Resort #9 Kwi	n 10th St. Mandalay, Myanmar
12.	Purpose of entry into Myanmar TOURISM - PRE	
13.	Attention for Applicants	
partic	not interfere in the internal affairs of the Rep (b) Legal actions will be taken against those whether the existing laws, rules and regulations of the reby declare that I fully understand the evaluars given above are true and correct and want to the purpose of entry stated herein. Date	o violate or contravene any provision of e Republic of the Union of Myanmar. above mentioned conditions, that the
CONTRACTOR CONTRACTOR	Date	~ Summer of a spp
	(FOR OFFICIAL US	E ONLY)
Visa N	No.	Date
Visa A	NoAuthority	
Date_		
Place	Washington D.C, United States of America	Embassy of the Republic of the Union Of Myanmar, Washington D.C

Embassy of the Republic of the Union of Myanmar Washington D.C.

Work History for Visa Applicant

1.	Nam	ne in Full (Fill in block letters):	
	Surr	name (As in Passport):	
	First	t Name & Middle Name:	
2.	Date	e of birth (dd/mm/yyyy) / /	
3.	Plac	ee of birth: U.S., (Other):	
4.	Perr	manent Home Address:	
5.	Tel.	(Res.) () (Work Place) ()	
	e-m	ail:	
6.	Wor	k Description (Current)	
	(a)	Job Title :	
		From(dd/mm/yyyy):/To (dd/mm/yyyy) / /	
	(b)	Office	-
		Department	
		Describe your Duties:	
7.		k Description (Previous)	
	(a)	Job Title:	
	4. >	From (dd/mm/yyyy) / / To (dd/mm/yyyy) / /	
	(b)	Office	-
		Department	
		Describe your Duties:	
			-
	I he	reby declare that the particulars given above are true and correct and that I will	not engage in any
ac		es irrelevant to the purpose of my entry.	
		S	Signature of Applicant
		Date: (dd/mm/yy	ryy) / /

Up Dated: May, 2014