

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

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





Visa(s)	#	#	Cost		Application	Expedite Fee
Req'd	Forms	Photos	1 – Persons - 2		Deadline	Per Person
Myanmar	3	2	\$169.00	\$308.00	July 10, 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 NY, NJ & CT must complete application form B. Residents of all other states must complete application form C. 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 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 <u>not including those reserved for amendments and endorsements at the back of your passport</u>. 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 July 10, 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

P	LEASE PRINT CLEARLY
Full Name (1):	Full Name (2):
Passport #: Exp	D:/ Passport #: Exp:/ Exp:/
Home	Home Tel:
Mailing	Work Tel:
Address:	Email:
(FedEx cannot deliver to PO b	Date of Departure from Home:// oxes)
Address	Tour Name: Myanmar
For the	Date of Tour Departure: 09 / 01 / 17
Return of	Special Instructions:
Passport:	
Tel:	
Please indicate below if there are known p for another international trip or when you	eriods prior to your tour during which you will need your passport will not be available to sign for the return of your passport.
I will need my passport(s) for other interna	ational travel from//year_ to///
I will not be at my home and/or return ship	oping address from//rear_ to///
CREDIT CARD AUTHORIZATION: AMEX	
Cardholder Name: Sig	nature: Billing Zip Code:
Card #:C	ID# Expires:/ Amount: US\$
FOR OFFICE USE ONLY	
	30 169/308 (APP FEE)15 3PGS VAL6MOS DL 07/10/17 40.00
3.5% TE MYANMAR 03 JUNE 2017 EN	ITER MYANMAR 03 SEPTEMBER 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 <u>www.Traveldocs.com/PTDSPassports</u>

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

#### SIDENTS OF AK AZ CA NV NM OR WA AND HI ONI V R

ESI	DENTS OF AK, AZ, CA, NV, NM, OR, WA AND HEONLY.	ю
Vis	a is valid for 3-months from the date of Issue CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MY	Copy No. 2
	3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFOR	
	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)
1,		E.V.T (Package Tour)
	JOHNATHAN / BONHAM / DOE	
	(First Name) (Middle Name) (Last Name)	
2.	Father's Full Name JOHANN / SEBASTIAN / DOE	РНОТО
•	(First Name) (Middle Name) (Last Name)	
3.	Date of Birth (dd/mm/yy): <u>13 / 03 / 1961</u>	Recently taken
4.	Place of Birth (City/State/Country)LOS ANGELES / CALIFORNIA / USA	color photo
5.	Nationality: <b>2</b> U.S./ <b>2</b> (Others):4. Sex <b>2</b> (F) / <b>2</b> (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: IMarried ISeparated IDivorced IWidowed 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 / Ift 6 in. 5	
	(c) Color of Eyes BLUE (d) Complexion CAUCASIAN	
	Passport	4
10	(a) Number 987654321 (b) Date of Issue (dd/mm/yy) 12 / 06 / 2010	
10.	(c) Date of Expiration (dd/mm/yy) $11 \equiv / 06 / 2020$	
	(d) Place of Issue: (e) Issuing Authority:	
	United States, United States, Department of State/	
	Other:Other:Other:	
11.	Present Address in U.S. 1234 MAIN STREET, ANYWHERE CALIFORNIA USA	
10	(Include apartment number, street, city, state or province & postal-zone)	
	Contact Ph. No.(Res:)(999) 888-7777 (Work)() N/A (Cell)(999) 666-3333	e-mail JDOE@ABC.COM
	Address in Myanmar: Sule Shangri La 223 Sule Pagoda Rd. GPO Box 888 Yangon, Myanmar	
	Have you ever been to Myanmar: DYes DNo (If Yes) Date of Last Visit: (dd/mm/yy)	/
15.	Have you ever been refused to enter Myanmar: Yes No (If Yes) When: (dd/mm/yy) /	/
	Why: PLEASE CONTACT PT/DS IF YES	
16.	Purpose of Visit: Tourism/ PRE PAID TOUR WITH AHI TRAVEL	
	(Expected date of Arrival: 03 / 09 / 17 Flight No. PYI & Departure: 17 / 09 / 1	7 Flight No. PYI
	dd mm yy dd mm y	
At	tention 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.	and any server of work, white of
	(b) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not inter	fere in the Internal Affairs of
	the Republic of the Union of Myanmar.	there in the internal / intails of
	(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.	iano, raios ana regulations of
	I hereby declare that I fully understand the above mentioned conditions, that the particula	ars given above and true and
	correct and that I will not engage in any activities irrelevant to the purpose of entry stated	herein
		ner ein.
	PLEASE DO NOT FORGET TO SIGN AND DATE ALL APPLIC	

## O NOT FORGET TO SIGN AND DATE ALL APPLICATION FORMS

		Signature of Applicant Date (dd/mm/yy) / /
	(FOR OFFICE USE ONLY)	
Visa No.	Date:	
Visa Authority: MOFA Lt. No. 4	6 11 11 (76) Dated: 11 March 1994	
(If other): MOFA Lt. No.	, Date:	

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: <u>myancgla@gmail.com</u>

Up Dated: May 2015

### RESIDENTS OF AK, AZ, CA, NV, NM, OR, WA AND HI ONLY.

### 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 / 03 / 1961
3.	Place of birth: U.S., LOS ANGELES, CA U (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 activities irrelevant to the purpose of my entry.

### PLEASE DO NOT FORGET TO DATE AND SIGN ALL APPLICATIONS

Signat	ture of A	pplicant	
Date:(dd/mm/yy)	/	1	

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

1. Name in Full (Fill in Block Letters)

	(First Name) (Middle Name) (Last 1	Name)
2.	Father's Full Name       /       /         (First Name)       (Middle Name)       (Last 1)	DUOTO
	(First Name) (Middle Name) (Last	Name) PHOTO
3.	Date of Birth (dd/mm/yy): / /	Recently taken
4.	Date of Birth (dd/mm/yy): / / / / / Place of Birth (City/State/Country) / / /	color photo
5.		( <b>D</b> (M)
6.	Present Occupation:	with full face front view
	(If retired write "retired", if student write "student")	no hat and against
7.		ried) a plain light background
	Spouse's Full Name:	
	Personal Description	
0	(a) Color of Hair(b) Height: <b>D</b> mcm/ <b>D</b> ft	in
	(c) Color of Eyes (d) Complexion	
	Passport	The second
10	(a) Number(b) Date of Issue (dd/mm/yy)/	
10.	(c) Date of Expiration (dd/mm/yy) / /	
	(d) Place of Issue: (e) Issuing Authority:	
	United States, United States, Department of	of State/
	Other:	
11	Other: ONational Passport Center/ I	00001
	(Include apartment number, street, city, state or province & postal zone)	
12	2. Contact Ph. No.(Res:)((Vote, exp, state of province & postal 2016) (Cell)(	) e-mail
13.	. Address in Myanmar: Sule Shangri La 223 Sule Pagoda Rd. GPO Box 888 Ya	angon Myanmar
14	Have you ever been to Myanmar: <b>D</b> Yes <b>D</b> No (If Yes) Date of Last Visit: (dd/mm/	
15	5. Have you ever been refused to enter Myanmar: <b>U</b> Yes <b>U</b> No (If Yes) When: (dd/mr	n/xy) / /
	Why:	
16.	5. Purpose of Visit: Tourism/ PRE-PAID TOUR WITH AHI TRAVEL	
	(Expected date of Arrival: 03 / 09 / 17 Flight No. & Depart	ure: <u>16</u> / 09 / 17 Flight No.
	dd mm yy	dd mm yy
Att	ttention for Applicant:	
	(a) Apart from the professions mentioned this visa application from applicants	are not to engage in any sort of work, with
	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
	the Republic of the Union of Myanmar.	
	(c) Legal action will be taken against those who violate or contravene any provis the Republic of the Union of Myanmar.	ion of the existing laws, rules and regulations
	I hereby declare that I fully understand the above mentioned conditions,	that the narticulars given above are true of
	correct and that I will not engage in any activities irrelevant to the purpo	se of entry stated herein
		se of energ stated herein.
		Signature of Applicant
		Date (dd/mm/yy) / /
	(FOR OFFICE USE ONLY)	
Vi	Tisa No. Date:	
	isa Authority: MOFA Lt. No. 46 11 11 (76) Dated: 11 March 1994	
¥ 1.	100 1 101 11 Di 110. TO 11 11 (10) Datou. 11 Watch 1994	

(If other): MOFA Lt. No.\_\_\_\_\_, Date:\_\_\_\_\_

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: <u>myancgla@gmail.com</u>

A

Official use only
E.V.T (F.I.T)

E.V.T (F.I.T)
E.V.T (Package Tour)

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 Official use only

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APP	LIC	AT	ION	FOF	T	OU	RIS	ST	VIS	SA	

1. Name in Full (Fill in Block Letters)

		1	ĩ			L E.V.T (Package Tour)
	(First Name)	(Middle Name)	/	(Last Na	ume)	æ
2. 1	Father's Full Name	(First Name) (Middle	/_ e Name)	(Last Na	uma)	РНОТО
3. ]	Date of Birth (dd/mm/vv):		o ryanie)	(Last 14a	une)	Devile
4. ]	Place of Birth (City/State/	Country)/////////_		/		Recently taken
5. 1	Nationality <b>D</b> US / <b>D</b> (Ot	hers):		4 Sex $\Pi(F) / \Pi$	(M)	color photo
D. 1	resent Occupation:					with full face, front view,
· · ·	If retired write "retired", i	f student write "student")				no hat and against
7. 1	Marital Status: Married	Separated Divorced Widd	wed Single	e (Never Marrie	(be	a plain light background
					, a)	
1	Personal Description					
		(b) Height: <b>D</b> m	cm	/ 🗍 🕆	in	
<i>/</i> .	(c) Color of Eves	(d) Complexio	n	/ BR	111.	
	Passport					
10.	(a) Number	(b) Date of Issue (dd/	mm/vv)	1 1		
	(c) Date of Expiration (dd/	/mm/yy) / /		(		
	(d) Place of Issue:		ing Authorit	v:		
				Department of S	State/	
	Other:					
11	Present Address in U.S.		ational 1 assp			
		r, street, city, state or province	& postal zor	1e)		
12.	Contact Ph. No.(Res:)(	_)(Work)(	)	(Cell)(	1	e-mail
13.	Address in Myanmar:			(0011)(		C-man
		anmar: 🛛 Yes 🖉 No (If Yes) Da	ate of Last V	isit: (dd/mm/vv	) /	1
15	Have you ever been refuse	ed to enter Myanmar: DYes D	No (If Yes) W	When: (dd/mm/s	//	/
10.	Why:		(11 1 00)		(y)	/
		m/ PRE-PAID TOUR WITH A		**************************************		
10.	(Expected date of Arrival	: <u>03 / 09 / 17</u> Flight N	Jo	& Departur	e 16 /09 /1	7 Flight No
	(infootoa aato or marriar	dd mm yy	10		dd mm	
Atte	ntion for Applicant:	aa min yy			dd mm	y y
		ssions mentioned this visa ap	plication from	m applicants ar	e not to engage	in any sort of work with o
	without charges.	ter in the second se			e not to enguge	o in any sole of work, with o
		by the Laws of the Republic	of the Union	of Myanmar an	nd shall not inte	rfere in the Internal Affairs o
	the Republic of the U	nion of Myanmar.				
	(c) Legal action will be ta	aken against those who violate	or contraver	ne any provision	n of the existing	laws, rules and regulations o
	the Republic of the U	nion of Myanmar.				
	I hereby declare that	t I fully understand the abov	e mentioned	l conditions, th	at the particul	ars given above are true and
	correct and that I wi	ill not engage in any activitie	s irrelevant	to the purpose	of entry stated	herein.
					2 <b>-</b> 21 - 141 - 2403 (2003) - 2404	
					Sig	nature of Applicant
					Date (dd/mm/	/yy) / /
<u></u>		(FOR OF	FICE USE ON	LY)		
Visa	No.	Date:				
Visa	a Authority: MOFA Lt.	No. 46 11 11 (76) Dated: 11	March 199	94	<b>-</b> .:	
		. ,				
200 <b>7</b> 01	en en an ar an entra de en					
						-

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

0 E.V.T (F.I.T)

### 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: 0 U.S., 0 (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)//To(dd/mm/yy)/
	(b) Office
	Department
	Describe your Duties:
	Describe your Duties:

I hereby declare that the particular given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant
Date:(dd/mm/yy) \_\_\_\_ / \_\_\_/

### **RESIDENTS OF NY, NJ & CT ONLY**

	GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAI	R
	MINISTRY OF IMMIGRATION AND POPULATION DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION	NC
	IMMIGRATION DEPARTMENT	
	APPLICATION FOR ENTRY TOURIST VISA	
1.	Name in full (In Block Letters) JOHNATHAN BONHAM DOE	
2.	JOHAN SEBASTIAN DOE	
3.		
5.	Date of Birth $\frac{03/13/1961}{6}$ 6. Place of Birth LOS ANGELES, CALIFO	ORNIA
7.	Occupation ENGINEER	1
8.	Personal Description	
	(a) Colour of hair BROWN (b) Height 6 FT 4 IN	
	(d) Color of eyes BROWN (d) Complexion CAUCASION	//
9.	Passport	
	(a) Number <u>987654321</u> (b) Date of issue <u>03/05/2010</u>	
	(c) Place of Issue WASH. DC (d) Issuing authority US DEPT OF STA	
	(d) Date of expiry 03/04/2020	
10.	D. Address in US and Tel No. 1234 MAIN STREET, LOS ANGELES CA 9876 999-888-7777	5
11.	1. Address in Myanmar MANDALAY HILL RESORT #9 KWIN 10TH ST. MAN	IDALAY

12. Purpose of entry into Myanmar TOURISM - PRE PAID TOUR

13. Attention for Applicants

- (d) 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.
- Legal actions will be taken against those violate or contravene any provision of the existing (b) 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.

Date		Signature of Applicant
	(FOF	R OFFICIAL USE ONLY)
Visa No		Date
Visa Autho	ority	
Date		
Place	New York	Permanent Mission of the Republic of
		the Union of Myanmar to the Union,
		New York

Photo

2x2 inches White background

### **RESIDENTS OF NY, NJ & CT ONLY**

# CONSULATE GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR, NEW YORK. Work History for Visa Applicant

JOHN	ATHAN	/ BONHAM		/ DOI	E				PHOT
Dated	(First Name) of Birth (dd/mm/yy)	(Middle No 13 / 03 / 196				(Last N	lame)		
Place	of Birth LOS ANGEL	.ES, CA.							
	anent Home Address MAIN ST. ANYWHEF		ment Num	ber, St	treet, C	ity, Sto	ite or P	rovin	ce & Postal 2
-	hone Number								
Home	: 999-888-7777		Work:	999-77	77-6666	6			
Work I	Description – Currer								
(a)	Job Title : ENGINE			From	-To (mr	n/yy)	09/08	00 T	0 08/09/15
(b)	Office/Section/Div					/			
(C)	Describe your Duti	es: ENGINEERI	NG	$\frown$	_	$\square$			
Work I	Description — Previou	: zt	$\bigcap$			$\bigcirc$			
(a)	Job Title : PRODU			From	-To (mr	m/yy)	12/10/	'90 TC	08/06/2000
(b)	Office/Section/Div	ision <b>PRODUCTI</b>	ON			$\searrow$	,		
(c)	Describ <b>e you</b> r Duti	es : PRODUCTIC	DN						
	$\Delta$								
						ļ			
Work I	Descriptio <mark>n — Pr</mark> evior								
(a)	Job Title : MACHIN	NE SUPERVISOR		From	-To (mr	m/yy)	09/08/	00 T	O 05/08/95
(b)	Office/Section/Div	ision MACHINE S	SHOP						
(c)	Describe your Duti	es : MACHINING							
1	/								

I hereby declare that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant

Date :

	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	
1.	Name in full (In Block Letters)	Photo 2x2 inches
2.	Father's name in Full	White background
3.	Nationality 4. Sex	
5.	Date of Birth 6. Place of Birth	
7.	Occupation	
8.	Personal Description	
	(a) Colour of hair (b) Height	
	(d) Color of eyes (d) Complexion	
9.	Passport	
	(a) Number (b) Date of issue	
	(c) Place of Issue (d) Issuing authority	
	(d) Date of expiry	
10.	Address in US and Tel No.	
11.	Address in Myanmar MANDALAY HILL RESORT #9 KWIN 10TH ST. MANDALAY	
12.	Purpose of entry into Myanmar TOURISM - PRE PAID TOUR	
13.	<ul> <li>Attention for Applicants</li> <li>(a) Applicant shall abide by the Laws of the Republic of the Union of Myanmar an interfere in the internal affairs of the Republic of the Union of Myanmar.</li> <li>(b) Legal actions will be taken against those violate or contravene any provision of the laws, rules and regulations of the Republic of the Union of Myanmar.</li> </ul>	
	y declare that I fully understand the above mentioned conditions, that the particulars gi e and correct and that I will not engage in any activities irrelevant to the purpose of e	
Date	Signature of A	pplicant
Vice N	(FOR OFFICIAL USE ONLY)	
visa ino Visa Au	Date	
Date		

Place

New York

Permanent Mission of the Republic of the Union of Myanmar to the Union, New York

	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	
1.	Name in full (In Block Letters)	Photo 2x2 inches
2.	Father's name in Full	White background
3.	Nationality 4. Sex	
5.	Date of Birth 6. Place of Birth	
7.	Occupation	
8.	Personal Description	
	(a) Colour of hair (b) Height	
	(d) Color of eyes (d) Complexion	
9.	Passport	
	(a) Number (b) Date of issue	
	(c) Place of Issue (d) Issuing authority	
	(d) Date of expiry	
10.	Address in US and Tel No.	
11.	Address in Myanmar MANDALAY HILL RESORT #9 KWIN 10TH ST. MANDALAY	
12.	Purpose of entry into Myanmar TOURISM - PRE PAID TOUR	
13.	<ul> <li>Attention for Applicants</li> <li>(a) Applicant shall abide by the Laws of the Republic of the Union of Myanmar an interfere in the internal affairs of the Republic of the Union of Myanmar.</li> <li>(b) Legal actions will be taken against those violate or contravene any provision of the laws, rules and regulations of the Republic of the Union of Myanmar.</li> </ul>	
	y declare that I fully understand the above mentioned conditions, that the particulars gi e and correct and that I will not engage in any activities irrelevant to the purpose of e	
Date	Signature of A	pplicant
Vice N	(FOR OFFICIAL USE ONLY)	
visa ino Visa Au	Date	
Date		

Place

New York

Permanent Mission of the Republic of the Union of Myanmar to the Union, New York

Nam	e in Full (Fill in Blocks)			РНО
	/		/	- 2x
	(First Name)	(Middle Name)	(Last Name)	
	of Birth (dd/mm/yy)/			
	e of Birth			L
Perm	nanent Home Address : (Incl	ude Apartment N	Number, Street, City, State or Prov	ince & Postc
-	phone Number e :	Wo	rk :	
	Description – Current :			
(a)	Job Title :		From-To (mm/yy)	
(b)	Office/Section/Division			
(c)				
Work	Description — Previous :			
(a)	-		From-To (mm/yy)	
(b)				
(c)				
Work	Description — Previous :			
(a)	-		From-To (mm/yy)	
(b)				
11				

I hereby declare that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant

Date : \_\_\_\_\_

	EMBASSY OF THE REPUBLIC O WASHING APPLICATION FO	TON DC	Recently taken Two color photos			
1.	Name in full (In Block Letters) JOHNATHAN	N BONHAM DOE	with full face, front view, no hat			
2.	Father's Full Name JOHAN SEBASTIAN DC	DE	and against a plain light background			
3.	110.4	$4. Sex \square (F) / \square (M)$	(attached with staple)			
5.	Date of Birth 03/13/1961	_ 6. Place of Birth_SEATTLE, WA.				
7.	Occupation_ENGINEER					
8.	Personal description					
	(a) Color of hairBROWN	_ (b) Height 6 FT. 3 IN.				
	(c) Color of eyes BROWN	(d) ComplexionCAUCASION				
9.	Passport					
	(a) Number <u>987654321</u>	(b) Date of issue05/07/2010				
	(c) Place of issue WASHINGTON DC	(d) Issuing Authority US DEPT	F OF STATE			
	(e) Date of expiry 05/06/2020					
10.	Marital Status:  Married  Separated  Di					
11.	Spouse's Full Name JOANNA LAUREN DOF					
12.	Permanent address 1234 MAIN STREET ANYWHERE, USA 98765					
13.	Address in Myanmar MANDALAY HILL RESC	ORT # 9 KWIN 10TH ST. MANDALA	Y, MYANMAR			
14.	Purpose of entry into Myanmar TOURISM - F	PREPAID TOUR				
15.	Expected dt. of Arrivak (dd/mm/yyyy)/	9/17 & Departure: (dd/mm/yyy	y) <u>16/09/17</u>			
16.	Attention for Applicants					
I hor	<ul> <li>(a) Applicant shall abide by the Laws of the interfere in the internal affairs of the Rep (b) Legal actions will be taken against those existing laws, rules and regulations of the existing laws, rules and regulations of the existing that I fully understand the above the existing the existing</li></ul>	public of the Union of Myanmar. e who violate or contravene any p e Republic of the Union of Myanr	provision of the nar.			
given	above are true and correct and that I will ose of entry stated herein.					
Date	(FOR OFFICIAI	Signature o	**			
	No	Date				
	Authority					
Place	Washington D.C, United States of America t : Tel. (202) 332 4352, (202) 238 9332 Fax.(202) 332 4351. http://	Embassy of the Republic of Myanmar, Wash	ington D.C			

С

### 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.	Date of birth (dd/mm/yyyy): $\frac{03}{13}$ / $\frac{1961}{1961}$						
	Place of birth: City;-LOS ANGELES Country;-USA						
4.	4. Permanent Home Address:         1234 MAIN STREET, ANYWHERE, CALIFORNIA						
5	Tel. (Res.) 999-888-7777						
5.	(Work Place) 999-777-6666						
	e-mail: JDOE@ANYWHERE.COM						
6.	5. Work Description (Current) (a) Job Title: ENGINEER						
	From (dd/mm/yyyy): 09 / 06 / 2000       To (dd/mm/yyyy): 08 / 09 / 2015         (b) Office MANAGEMENT						
	Department_ENGINEERING						
	Describe your duties: ENGINEERING PROJECTS						
7.	7. Work Description (Previous)						
	(a) Job Title: PRODUCTION MANAGER						
	From (dd/mm/yyyy): <u>12</u> / <u>10</u> / <u>1990</u> To (dd/mm/yyyy): <u>4</u> / <u>06</u> / <u>2000</u> (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 any activities irrelevant to the purpose of my entry.

PLEASE BE CERTAIN TO SIGN AND DATE YOUR APPLICATIONS

Signature of Applicant

Date: (dd/mm/yyyy) \_ \_ / \_ \_ / \_ \_ \_ /

	APPLIC	WASHINGTON DC CATION FOR TOURIST VISA	Recently taken Two color photos	
1.	Name in full (In Block Letters)		with full face, front view, no hat and against a plain	
2.	Father's Full Name			
3.	Nationality	4. Sex $\Box$ (F) / $\Box$ (M)	staple)	
5.	Date of Birth	6. Place of Birth		
7.	Occupation			
8.	Personal description			
	(a) Color of hair	(b) Height		
	(c) Color of eyes	(d) Complexion		
9.	Passport			
	(a) Number	(b) Date of issue		
	(c) Place of issue	(d) Issuing Authority		
	(e) Date of expiry			
10.	Marital Status:  I Married I September 2018	Darated □ Divorced □ Widowed □ Single		
11.	Spouse's Full Name			
12.	Permanent address			
13.	Address in Myanmar MANDALA	Y HILL RESORT #9 KWIN 10TH ST. MANDAI	AY, MYANMAR	
14.	Purpose of entry into Myanmar TOURISM - PREPAID TOUR			
15.	Expected dt. of Arrival: (dd/mm/yyyy)/ & Departure: (dd/mm/yyyy)/			
16.	<b>Attention for Applicants</b>			
	(b) Legal actions will be taken	Laws of the Republic of the Union of Myar rs of the Republic of the Union of Myanma against those who violate or contravene an ilations of the Republic of the Union of Mya	r. y provision of the	
giver	• •	and the above mentioned conditions, tha d that I will not engage in any activities	_	
Date		_	e of Applicant	
		R OFFICIAL USE ONLY)		
	No			
Visa	Authority			

Contact : Tel. (202) 332 4352, (202) 238 9332 Fax.(202) 332 4351. http://mewashingtondc.com, e-mail: mewdcusa@yahoo.com)

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	APPLIC	WASHINGTON DC CATION FOR TOURIST VISA	Recently taken Two color photos	
1.	Name in full (In Block Letters)		with full face, front view, no hat and against a plain	
2.	Father's Full Name			
3.	Nationality	4. Sex $\Box$ (F) / $\Box$ (M)	staple)	
5.	Date of Birth	6. Place of Birth		
7.	Occupation			
8.	Personal description			
	(a) Color of hair	(b) Height		
	(c) Color of eyes	(d) Complexion		
9.	Passport			
	(a) Number	(b) Date of issue		
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15.	Expected dt. of Arrival: (dd/mm/yyyy)/ & Departure: (dd/mm/yyyy)/			
16.	<b>Attention for Applicants</b>			
	(b) Legal actions will be taken	Laws of the Republic of the Union of Myar rs of the Republic of the Union of Myanma against those who violate or contravene an ilations of the Republic of the Union of Mya	r. y provision of the	
giver	• •	and the above mentioned conditions, tha d that I will not engage in any activities	_	
Date		_	e of Applicant	
		R OFFICIAL USE ONLY)		
	No			
Visa	Authority			

Contact : Tel. (202) 332 4352, (202) 238 9332 Fax.(202) 332 4351. http://mewashingtondc.com, e-mail: mewdcusa@yahoo.com)

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### 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):					
	Surname (As in Passport):					
	First Name & Middle Name:					
2.	Date of birth (dd/mm/yyyy)://					
3.	Place of birth: City; Country;					
	Permanent Home Address:					
5						
э.	Tel. (Res.)					
	(Work Place)e-mail:					
6	e-mail:					
0.	(a) Job Title:					
	From (dd/mm/yyyy):/ To (dd/mm/yyyy)://					
	(b) Office					
	Department					
	Describe your duties:					
7.	Work Description (Previous)					
	(a) Job Title:					
	From (dd/mm/yyyy):/ To (dd/mm/yyyy)://					
	(b) Office					
	Department					
	Describe your duties:					

I hereby declare that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant Date: (dd/mm/yyyy) \_ \_ / \_ \_ / \_ \_ \_ /