



## THE EMBASSY OF THE UNITED REPUBLIC OF TANZANIA.

2139 R Street, NW Washington, DC, 20008.

Tel. (202) 939.6125 and (202) 884.1080; Fax (202) 797.7408.

FOR OFFICIAL USE ONLY

GRR NO. \_\_\_\_\_

VISA NO. \_\_\_\_\_

Ref. NO. \_\_\_\_\_

### VISA APPLICATION FORM.

(Visa Regulations on the next page).

Please Affix  
Passport Size  
Photograph here.

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 (MM/DD/YY) \_\_\_\_\_ Sex (M/F) \_\_\_\_\_
3. Marital Status (Mark):  Single  Married  Divorced  Widowed  Legally Separated.
4. Place of Birth \_\_\_\_\_ Country of Birth \_\_\_\_\_  
Current Nationality (State if Dual Nationality) \_\_\_\_\_  
Previous Nationality \_\_\_\_\_
5. Passport No. \_\_\_\_\_ Date Issued \_\_\_\_\_ Place Issued \_\_\_\_\_  
Valid Until \_\_\_\_\_ Issuing Authority \_\_\_\_\_
6. Profession/Occupation \_\_\_\_\_  
If employed, state employer \_\_\_\_\_
7. Current Address \_\_\_\_\_  
Tel. \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_
8. Proposed Date of Entry \_\_\_\_\_ Duration of Stay \_\_\_\_\_
9. Means of Travel to Tanzania \_\_\_\_\_
10. Name of Travel Agent/Tour Operator \_\_\_\_\_
11. Contact Person(s) in Tanzania \_\_\_\_\_  
Address \_\_\_\_\_
12. Previous Visits to Tanzania (indicate dates and duration) \_\_\_\_\_  
\_\_\_\_\_
13. Type of Visa applied:  Tourist  Business  Professional  Official  Research  Journalism  Student.
14. Category of Visa applied:  Single  Multiple.
15. For Multiple Visa – Duration:  Three Months  Six Months  Nine Months  Twelve Months
16. Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_