| For Official Use Only: | APPLICATION FOR A VISA | |
|---|---|--------------------|
| File Number: | REPUBLIC OF BOTSWANA IMMIGRATION ACT (Cap. 25:02) (Regulation 6(1)) | SH) WO |
| Surname: | Please use block letters and black ink only | |
| First Name: | | Photo 3cm x 4cm |
| 2. Age: Date of Birth: | | |
| | Status: Single Married Divorced | Separated Widowed |
| 3. Nationality (state name of country): | | |
| 4. (a) Type of Visa required | 4. (b) Number of Entries | |
| Ordinary Continuous Transit | Single Multiple | |
| 5. Address in Botswana: Town/Village: | | |
| Street/Ward: | Plot/House No: | |
| 6. Address in Country of Domicile: Country: Town/Village: | | |
| | | |
| Street/Ward: | Plot/House No: | |
| 7. Occupation: Qualifications: | | |
| | | |

9. Reasons in full for wishing to travel to the Republic of Botswana (Satisfactory evidence will be required as to the object of the proposed journey. Employees of firms or persons acting on behalf of firms must produce certificates from their employers as to the nature and physical address of the business on which they are proceeding abroad.
Bankers reference may be required):

8. Proposed Length of Stay on whether traveling in transit without break of journey:

1

| (4) | - (Will Harries, 1 Hysical A | ddress, Telephone No, Re | sidence Permit N | o, ID No): | |
|--|------------------------------|--|------------------|--------------|---------|
| (1) | | (2) | | | |
| | | | | | |
| 8 | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Please indicate what money or cash (a | | posal during your visit: | Other: | L | |
| Particulars of Passport or other travel of the complex is a second of the complex in the complex | documents which should b | pe submitted with this Appliance of Issue: | cation. | | |
| | | 1 1 1 1 1 | 1111 | 1 1 1 1 | 1 1 1 |
| D D M M Y Y Y Y D | e of Expiry: | | | Valid Until | |
| D D M M Y Y Y Y D | | | | Valid Until: | M Y Y Y |
| eturn Visa to: referred method of communication: | | | | | M Y Y Y |
| | | | | | M Y Y Y |
| eturn Visa to: referred method of communication: -mail Cell phone Number: | D M M Y Y Y | Y | | | M Y Y Y |
| eturn Visa to: Preferred method of communication: -mail | D M M Y Y Y | Y | P.O. Bo | | M Y Y Y |
| eturn Visa to: | D M M Y Y Y | Telephone Number: | P.O. Bo | D D M N | M Y Y Y |

AT LEAST FOURTEEN DAY'S NOTICE should be given for each application.

NOTE: Any visa granted on this application will be subject to compliance with the Immigration Regulations of the Republic of Botswana.