



PHOTO

**EMBASSY OF THE REPUBLIC OF CUBA  
CONSULAR SECTION  
APPLICATION FORM FOR A VISA**

(To be completed in block letters)

Full names and surnames: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Country of Birth: \_\_\_\_\_  
D M Y

Nationality: \_\_\_\_\_ Sex: \_\_\_\_ \_\_\_\_ Marital Status: \_\_\_\_\_  
M F

Occupation: \_\_\_\_\_

Home address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name and business address: \_\_\_\_\_

Passport No.: \_\_\_\_\_ Type: \_\_\_\_\_

Issuing Country: \_\_\_\_\_ Issuing date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Valid until: \_\_\_\_/\_\_\_\_/\_\_\_\_  
D M Y D M Y

Purpose of visit: \_\_\_\_\_

Was the applicant previously in Cuba? \_\_\_\_\_ When? \_\_\_\_\_

Name and address of place of accommodation in Cuba:

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**(FOR BUSINESS AND OFFICIAL VISITS)**

Date of entry: \_\_\_\_\_ Date of exit: \_\_\_\_\_

Place of embarking: \_\_\_\_\_ Place of entry: \_\_\_\_\_

Particulars of minor children who will accompany the applicant and are included in the applicant's passport.

Name	Place of Birth	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I declare that the above particulars given by me are true in substance and fact.

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

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THIS SPACE TO BE LEFT BLANK FOR OFFICIAL USE

Date of granting \_\_\_\_\_ Type of visa \_\_\_\_\_

Signature \_\_\_\_\_

Observations

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_