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www.exclusiveglobalvisas.co.za

IRELAND VISA APPLICATION FORM

Please use this form as a guideline in order for Exclusive Global Visas to complete your online application.

In order to avoid delays in uploading this application we request that you **complete** each question IN FULL.

On the last page of this application there is space for any additional information you would like to share with us.

Reason for travel

☐ Tourist ☐ Business ☐ Visit Family / Friends

Passport Type

☐ Ordinary ☐ Official ☐ Diplomatic

Passport/Travel Document number

Proposed dates you wish to enter and leave Ireland

Enter:

Leave:

Personal Details

Surname:

Forename:

Other Name:

Date of Birth:

Gender

☐ Male ☐ Female

Country of Birth:

Nationality:

Current Location

Current Address:

Contact phone number:

Email address:

Length of residence in present country:

Do you have permission to return to that country after your stay in Ireland: ☐ YES ☐ NO

Have you applied for an Irish Visa / Pre clearance before☐ YES ☐ NO

Have you ever been issued an Irish Visa / Pre clearance before☐ YES ☐ NO

(If yes please provide the location, transaction number and year of issue:)

Have you ever been to Ireland before: ☐ YES ☐ NO

Do you have family members living in Ireland: ☐ YES ☐ NO

Have you been refused permission to enter Ireland before:☐ YES ☐ NO

Have you ever been notified of a deportation order to leave Ireland: ☐ YES ☐ NO

Have you ever been refused a visa to any other country: ☐ YES ☐ NO

Have you ever been refused entry to, deported to, deported from, overstayed permission in, or were otherwise required to leave any country ☐ YES ☐ NO

If yes to any of the above please give details:

Have you ever had criminal convictions in any country: ☐ YES ☐ NO

Passport Details

Passport / Travel document number:

Type of travel document:

Issuing authority / type:

Date of issue:

Date of expiry

Is this your first passport: ☐ YES ☐ NO

Employment / School / College Details

Are you currently employed in your country of residence: ☐ YES ☐ NO

Current employer:

Duration of employment: Years

Months

Position held:

Work address:

Employers Phone number:

Employers Email address:

Are you currently a Student in your country of residence: ☐ YES ☐ NO

If your answer is yes:

Name of School / College

Address:

Telephone Number

Travel Details

Will you be travelling with any other persons: ☐ YES ☐ NO

(if yes)

Name of person travelling with you:

Relationship:

☐ YES ☐ NO

Nationality:

Do you have a host or contact in Ireland:

Accommodation / Contact / Host name:

Accommodation / Contact / Host Telephone No:

Accommodation / Company / Host Address

Is the Host in Ireland personally known to you(e.g. family or friend) ☐ YES ☐ NO

If yes:

Surname and family name as in passport:

Forename:

Country of citizenship:

Occupation:

Relationship to Applicant:

Department of Justice Reference Number (For non-EEA Nationals

Date of Birth:

Email:

Your Family

Personal Status ☐ Single ☐ Married ☐ Divorced ☐ Widow

Spouse / Partners Details

Name / Family Name (as in passport)

Forenames (as in passport)

Other Name(s) maiden or Name at Birth:

Date of birth:

Passport Number:

Gender: ☐ Male ☐ Female

In what country does your spouse / partner currently live:

Is your spouse / Partner travelling with you: ☐ YES ☐ NO
(if yes, on applicants passport: ☐ YES ☐ NO

Children Details

How many children do you have

Please provide the details of any dependant children:

Full Names / Date of birth / Gender / Nationality / If they are travelling you:

N.B If any of your children listed below are travelling with you, THEY WILL NEED THEIR OWN APPLICATION

Any additional information with regards to this application?

Please remember

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Completed by:

Full Name:

Tel:

Email Address:

Date:

Digital Signature Accepted