



2 x 2
One (1) Passport picture

Taken within
six (6) months

GLUED or PASTE

DO NOT STAPLE

VISA APPLICATION FORM

Type of visa requested *

- Diplomatic (Type-A) Visa Principal Applicant
- Official (Type-B) Visa Dependent

Last Name: * _____
First Name: * _____
Gender: * Male Female
Date of Birth * Day _____ Month _____ Year _____
Place of Birth * _____
Birth Nationality * _____
Present Nationality: * _____
Passport Number: * _____
Place of Issue: * _____
Date of Issue: _____
Date of Expiration: * _____

Present Occupation*: _____
Employer*: _____
Current Home Address: * _____
Mobile Phone: * _____
Home Phone: _____
Email Address: *

Arrival Date in Cambodia* Jan - Feb - Mar - Apr
May - Jun - Jul - Aug
Sep - Oct - Nov - Dec
Day _____ Month _____ Year _____
Exit Date in Cambodia* Jan - Feb - Mar - Apr
May - Jun - Jul - Aug
Sep - Oct - Nov - Dec
Day _____ Month _____ Year _____

Point of Entry: * _____
Means of Transportation: * _____
Address during the visit: * _____

Point of Exit: * _____
Means of Transportation: * _____
First trip to Cambodia: Yes No
(If answer is NO) Last date you entered Cambodia:
Day _____ Month _____ Year _____

Purpose of trip: * _____

Application Checklist

- Completely filled-up Visa Application Form (2 copy)
- Copy of the passport bio-page (2 copy)
- Endorsement letter (2 copies)
- from the Department of State or sending/inviting organization
- Actual (Original) Passport
- Valid at least six (6) months upon entering Cambodia
- At least two (2) blank pages for visa sticker and date stamp
- No loose pages, inserts, or passport covers
- UPS or FedEx (recommended) prepaid self-addressed return envelope for mail-in applications only

Name of trip organizer (if applicable): _____
His/her number: * _____
His/her email address: * _____

FOR OFFICIAL USE ONLY:

DATE PROCESSED _____

VISA NUMBER _____

TYPE OF VISA _____

I hereby declare that the information on this form is true and correct

VISA APPLICANT
Signature, Name and Date*