## REPUBLIC OF RWANDA



## NATIONAL INTELLIGENCE AND SECURITY SERVICE DIRECTORATE GENERAL OF IMMIGRATION AND EMIGRATION

VISA APPLICATION Visa applied for: Transit / Tourist / Visitor's-Resident –Permanent Length of stay:  COLOURED PHOTO
1. Given name(s)  (As shown in your passport)
2. Family name(s)  (As shown in your passport)  3. Other name(s) (including other names  You are known by and/or other names that you have been known by)  4. Gender: put a tick (√) in the relevant box  Male Female  5. Date of Birth Day Month Year District Country  7. Nationality of Birth 9. Local Telephone contact
10. Passport No
16. Father's name mother' name
17. Father's nationality mother's nationality
18. Parent's address 19. Marital Status: $put \ a \ tick \ (\sqrt{\ }) \ in \ the \ relevant \ box$
Married Widowed Divorced Never Married/single
20. Name of spouse Spouse's nationality
21. Born at ; on Day Month Year

23. Former visits or stay in Rwanda, and time of stay
24. Former stays in Africa, places, and dates
25. Reason for visa application
26. Proposed persons to be visited and their address:
27. Persons accompanying (children) put a tick ( $\sqrt{\ }$ ) in the relevant box
1. Name 2. Name
Gender: Male Female Gender: Male Female
Date of birth: Day Month Year Date of birth: Day Month Year
3. Name 4. Name
Gender: Male Female Gender: Male Female
Date of birth: Day Month year Date of birth Day Month Year
I hereby certify that all information is complete and correct
Signature
Done at, On Day Month Year
Do not write below this line, for official use only

P. O. BOX 6229, KIGALI Tel. +250 0252585430 / +250 7888 99971 Fax +250 0252585292 Email: permit@migration.gov.rw

O Rwanda Directorate General of immigration and Emigration