

GOVERNMENT OF THE UNION OF MYANMAR
DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION
IMMIGRATION DEPARTMENT
APPLICATION FOR ENTRY TOURIST VISA

P H O T O

(To be handed over to the immigration officer at the port)

1. Name in full (in Block letters) _____

2. Father's Name in full _____

3. Nationality _____ 4. Sex _____

5. Date of birth _____ 6. Place of birth _____

7. Occupation _____

8. Personal description

(a) Colour of hair _____ (b) Height _____

(c) Colour of eyes _____ (d) Complexion _____

9. Passport

(a) Number _____ (b) Date of issue _____

(c) Place of issue _____ (d) Issuing authority _____

(e) Date of expiry _____

10. Permanent address _____

11. Address in Myanmar _____

12. Purpose of entry into Myanmar _____

13. Attention for Tourists

(a) Applicant shall abide by the Laws of the Union of Myanmar and shall not interfere in the internal affairs of the Union of Myanmar.

(b) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Union of Myanmar.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

Date _____

Signature of applicant

(FOR OFFICE USE ONLY)

Visa No. _____ Date _____

Visa authority _____

Date _____

Place Rome _____

Signature of officer in - charge
Embassy of the Union of Myanmar