

THE REPUBLIC OF UGANDA



Passport size
photograph
here.

VISA APPLICATION FORM

This form must be fully completed in English using blue or black ink.
Please attach one (1) passport size photograph.

1. Full Names (as they appear in the passport)

2. Applicant's contact details:

a) Permanent/Home address _____

Mobile _____ Office Tel: _____

b) Present _____

Mobile _____ Office Tel _____

e) Email address _____

3. Date & Place of Birth _____

4. Nationality:

a) Present _____

b) Former _____

5. Job Title/Position _____

Name of Employing Agency/Organization _____

6. Marital Status: Married/Single/Divorced or separated: _____

7. Names, Places & Dates of Birth of any Children/Wife accompanying Applicant:

a) _____

b) _____

c) _____

d) _____

8. Passport No. _____ Place of issue _____
Date of issue _____ Expiry date _____
Type: (Diplomatic) (Official) (Ordinary)
Issuing Authority _____

9. Visa Required (*tick*)
Type: Tourist _____ Business _____ Official _____
Other (*please specify*) _____

10. Proposed date of travel to Uganda _____

11. Duration of stay _____

12. Date (s) of any previous visit (s) _____

13. If in transit, ultimate destination _____

N.B. The ultimate destination Visa should be obtained first.

14. Purpose of Visit to Uganda _____

15. Proposed Residential Address in Uganda _____

16. Names of Persons or Organization you will be contacting in Uganda

Names _____

Address _____

Relationship _____

17. DECLARATION: *I hereby declare that the information given above is correct.*

Date _____ Signed _____

.....
Official Use Only

Office of Origin _____

Remarks _____

Official Date Stamp)

Signature _____

Fee Paid _____

Title _____