



PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM.					REQUEST No. _____	
FIRST NAME		MIDDLE NAME		LAST NAME		
SEX ☐ MALE ☐ FEMALE		DATE OF BIRTH <i>D</i>/ <i>M</i>/ <i>YY</i>		COUNTRY OF BIRTH		
CURRENT NATIONALITY				ORIGINAL NATIONALITY (NATIONALITY AT BIRTH)		
PASSPORT TYPE ☐ ORDINARY ☐ SERVICE ☐ DIPLOMATIC ☐ TRAVEL DOCUMENT ☐ OTHER						
PASSPORT NUMBER		ISSUE DATE <i>D</i>/ <i>M</i>/ <i>YY</i>		EXPIRATION DATE <i>D</i>/ <i>M</i>/ <i>YY</i>		
HOME/MAILING ADDRESS						
CITY/TOWN		STATE/REGION		ZIP/POSTAL CODE		COUNTRY
DAY TEL.		EVENING TEL.		FAX		E-MAIL
CURRENT OCCUPATION						
PURPOSE OF TRAVEL ☐ TOURISM/FAMILY VISIT ☐ BUSINESS ☐ OFFICIAL ☐ TRANSIT ☐ OTHER						
DATE OF DEPARTURE FROM USA		DATE OF ARRIVAL IN ETHIOPIA		BORDER OF FIRST ENTRY		
DURATION OF STAY IN ETHIOPIA				ENTRIES: ☐ SINGLE ☐ DOUBLE ☐ MULTIPLE		
ADDRESS IN ETHIOPIA HOTEL: HOTEL NAME						PHOTO ATTACH ONE PASSPORT SIZE PHOTOGRAPH. <i>WRITE YOUR NAME ON THE BACK OF THE PHOTOGRAPH.</i>
HOTEL TELEPHONE NUMBER						
CONTACT PERSON IN ETHIOPIA						
TELEPHONE NUMBER						
FAMILY ACCOMMODATION: CITY REGION ZONE K. KETEMA (WOREDA) KEBELE HOUSE NO. TELEPHONE						
CHILDREN/DEPENDENTS ON THE SAME PASSPORT						
FIRST NAME		MIDDLE NAME		LAST NAME		SEX
BIRTH DATE (D/M/YY)		BIRTH PLACE				
1						
2						
3						
4						
5						
I, THE UNDERSIGNED, DECLARE THAT ALL THE ABOVE-MENTIONED STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE.						
APPLICANT'S NAME		APPLICANT'S SIGNATURE			DATE	
DO NOT WRITE IN THIS SPACE FOR OFFICIAL USE ONLY/ TO BE FILLED IN AT HEAD OFFICE						
VISA NUMBER		VISA TYPE		DATE OF ISSUE		EXPIRATION DATE
PROCESSED BY NAME		SIGNATURE			DATE	
APPROVED BY NAME		SIGNATURE			DATE	