

ሃገረ ኢርትራ
 STATE OF ERITREA
 ከዩናይትድ ኪንግደም ዜግነትን
 DEPT. OF IMMIGRATION & NATIONALITY
 መስተት ንመልተዊ ቪዛ
 APPLICATION FORM FOR ENTRY VISA

ቴዎድሮስ ሙሉድ ኢ.ጊ.ጊ.ጊ
IMMIGRATION IDENTITY No.

1 ምሉእ ስም (ከም ፓስፖርት) FULL NAME (AS IN PASSPORT)	2 ጾታ /SEX <input type="checkbox"/> ተባ / MALE <input type="checkbox"/> ልዩ / FEMALE
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3 ለቆደው ሃሰሪ ወይ ካልእ ስም (የተለየ) FORMER/OTHER NAME (If different from above)

4 ቦታ ልደት PLACE OF BIRTH	ከተማ CITY OR TOWN	ዕለት ልደት DATE OF BIRTH	ዕለት DATE	ወርሐ MONTH	ዓመት YEAR	5 ስራ OCCUPATION
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6 ህዳድ ህግነት PRESENT NATIONALITY	7 የፖስት ተጽራኝ ፓስፖርት PASSPORT TYPE & No.
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8 ፓስፖርት ህተቃህዛት ዕለት PLACE OF ISSUE OF PASSPORT	ፓስፖርት ህተቃህዛት ዕለት DATE OF ISSUE OF PASSPORT	ዕለት DATE	ወርሐ MONTH	ዓመት YEAR	8.1 ፓስፖርት ምዕድቀት ዕለት DATE OF EXPIRY OF PASSPORT	ዕለት DATE	ወርሐ MONTH	ዓመት YEAR
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9 ቀዋሚ አድራሻ PERMANENT ADDRESS:	ሃገር/COUNTRY	ከተማ CITY OR TOWN	ንድፍን ቁጽሪ ገዛን STREET AND NUMBER	ቁ. ቴሌፎን TEL. No.
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10 አድራሻ አብ ኢርትራ ADDRESS IN ERITREA	ከተማ CITY OR TOWN	ንድፍን ቁጽሪ ገዛን STREET AND NUMBER	ቁ. ቴሌፎን TEL. No.
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11 ጠቃሚ ሓታቲት ምስትት ሰብ/አካል REFERENCE IN ERITREA
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አድራሻ ADDRESS	ከተማ CITY OR TOWN	ንድፍን ቁጽሪ ገዛን STREET AND NUMBER	ቁ. ቴሌፎን TEL. No.
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12 ምክንያት መልተዊ PURPOSE OF ENTRY	<input type="checkbox"/> ዕደት TOURISM	<input type="checkbox"/> ወግግጭ OFFICIAL	<input type="checkbox"/> ጥገና BUSINESS	<input type="checkbox"/> ስራ EMPLOYMENT	<input type="checkbox"/> ትምህርቲ STUDENT	<input type="checkbox"/> ዘመድ ጥብራሕ FAMILY VISIT	<input type="checkbox"/> ካልእ OTHER
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13 ዘድላ መልተዊ ENTRY DESIRED	<input type="checkbox"/> ንጽላ SINGLE	<input type="checkbox"/> ብዙሕ MULTIPLE	14 ዝጸንሐሉ ገዜ PERIOD OF STAY:
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15 ለሌሎች ጠቃራ ሰነድ ህገሹ PERSONS TRAVELLING ON THE SAME PASSPORT:
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ተ.ቁ No.	ስም NAME	ጾታ SEX	ዕለት ልደት DATE OF BIRTH			ቦታ ልደት PLACE OF BIRTH
			ዕለት DATE	ወርሐ YEAR	ዓመት MONTH	

16 እኔ CORRECT AND COMPLETE	ከሌ ህገህኩም ሓበራታ ትንቢት ምሉእን ምክንያት ኢረጋግጽዎ DECLARE THAT THE INFORMATION GIVEN ABOVE IS	
ቦታ PLACE	ዕለት DATE	ክታም SIGNATURE

17 ንግዳ መዚ ጥራይ ህምላክት / FOR OFFICIAL USE ONLY
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ዝተወሰደ ውሳኔ DECISION TAKEN

ቁ. መልተዊ ቪዛ ENTRY PERMIT No.

ርእይቶ REMARKS

ዕለት DATE	ስም ሰዓልመዚ NAME OF AUTHORITY	ክታም ሰዓልመዚ /SIGNAURE OF AUTHORITY
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Form 62.7.3

STATE OF ERITREA
MINISTRY OF FOREIGN AFFAIRS
IDENTITY CLARIFICATION FORM

THE ERITREAN EMBASSY OR MISSION _____ Code _____

Ref.No. _____ Date ____/____/____

To: - THE DEP. OF IMMIGRATION & NATIONALITY
ALIENS DIVISION

1. FULL NAME OF APPLICANT AS IN PASSPORT (PERSON WHO REQUESTS ENTRY VISA)

2. SEX _____

3 PRESENT NATIONALITY _____ 3.1 NATIONALITY BY BIRTH _____

3.2 OTHER NATIONALITIES IF ANY _____ 4. DATE OF BIRTH ____/____/____

5. PASSPORT No. _____ 6. PASSPORT EXPIRATION DATE ____/____/____

7. APPLICANT'S SIGNATURE _____ 7.1 DATE ____/____/____

FOR OFFICIAL USE ONLY

7. እብ ልዕሊ መገተጃ ቪዛ ክወገብ ዝሓትት ተገልጋሊ ዝተገብረ
ደቂቕ ምጽራይ ህ ግለት ብዘይካኒቲ ብወግዒ ንምእታው ዘቐርቦ
ምዝገባት ካል ልላግ ከይህልዎ ዝኖትሽ ኢዩህ እዚ ክፋልዚ
ብትግርኛ ወይ ብግሪብኛ ነምሳእ ይካላህ

بإضافة إلى البحث الدقيق لأسباب الزيارة المذكورة من مقدم الطلب. هذا الجزء
يكتب باللغة العربية أو التجريدية إذا كانت هناك شكوك أو هدف آخر يناقش سبب
الزيارة المذكورة رسمياً.

Multiple horizontal lines for official use only.

NB Passport copy should be attached with this form

Official stamp

Name of authority

Signature of authority
