

Islamic Republic of Afghanistan Visa Application Form

| Personal Details | | | | | | | |
|--------------------------------|----------|-----------|-----------|-------------|-------------------|--|--|
| Title: | | | | | | | |
| Family Name: | | | | | | | |
| Given Names: | | | | | | | |
| | | | | | | | |
| Father's Full Name: | | | | | | | |
| | | | | | | | |
| Date of Birth (Gregorian): / / | | | | | | | |
| Country of Birth: | | | | | | | |
| Marital Status: | Single | ☐ Engaged | ☐ Married | ☐ Separated | ☐ Widow / Widower | | |
| Gender: | ☐ Female | ☐ Male | | | | | |
| Child: (Under 18 Years) | ☐ Yes | □ No | | | | | |
| Country of Residence: | | | | | | | |
| Nationality: | | | | | | | |
| Other Nationalities: | | | | | | | |
| Contact Details | | | | | | | |
| Current Address: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Email Address: | | | | | | | |
| Mobile: | | | Work Tel: | | | | |
| Home Tel: | | | Fax: | | | | |
| Employment Detai | ils | | | | | | |
| Current Occupation: | | | | | | | |
| | | | | | | | |
| Employer's Name: | | | | | | | |
| Employer's Address: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Previous Employer's Name: | | | | | | | |
| Previous Employer's Address: | | | | | | | |
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| Visa Details | | | | | | | |
|---|---------------------------------------|-------------------------------------|--|--|--|--|--|
| Visa Type: | | | | | | | |
| Purpose of Journey: Business Convention / Conf | erence | ☐ Employment ☐ Other | | | | | |
| Entry Date: | Point of Entry: | | | | | | |
| Intended Duration of Stay (days): | Number of Children Accompanied: | | | | | | |
| Places in Afghanistan intended to visit: | | | | | | | |
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| | | | | | | | |
| Complete Address in Afghanistan: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Have you ever visited Afghanistan before?: | □ No □ | ☐ Yes | | | | | |
| If yes, please provide details: | | | | | | | |
| | | | | | | | |
| Have you applied for an Afghanistan Visa before?: |] No | Yes | | | | | |
| If yes, please provide details: | | | | | | | |
| | | | | | | | |
| Do you have a criminal record?: | No Yes | | | | | | |
| If yes, please provide details: | | | | | | | |
| | | | | | | | |
| Passport Details | | | | | | | |
| Passport Type: | | | | | | | |
| Passport Number: | | | | | | | |
| Place of Issue: | | | | | | | |
| Issue Date: | | | | | | | |
| Expiry Date: | | | | | | | |
| | | | | | | | |
| I declare that the information provided in this application is true and correct | | | | | | | |
| Passport Photograph: (Please Attach Within The Square In Note: The photograph must comply with the attack guidelines. | | | | | | | |
| | | Guarantor must endorse the photo | | | | | |
| | Please | This is a true photo of: | | | | | |
| | Attach Photo (name of applicant) Here | | | | | | |
| Date: / / | | (signature of guarantor) | | | | | |
| | - | | | | | | |