APPLICATION FOR A VISA

REPUBLIC OF BOTSWANA
IMMIGRATION ACT
(Cap. 25:02)
(Regulation 6(1))

Please use block letters and black ink only

1. Name (in full):
   Surname: ____________________________
   First Name: _________________________
   Middle Name: _______________________
   Previous/Maiden Surname: ______________

2. Age: ________ Date of Birth: __________
   Y Y Y D D M Y Y Y
   Country of Birth: _______________________
   Place of Birth: ________________________

   Sex: Male ☐ Female ☐
   Marital Status: Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed ☐

3. Nationality (state name of country):
   __________________________

4. (a) Type of Visa required
   Ordinary ☐ Continuous ☐ Transit ☐
   4. (b) Number of Entries
   Single ☐ Multiple ☐

5. Address in Botswana:
   Town/Village: _______________________
   Street/Ward: _________________________
   Plot/House No: _______________________

6. Address in Country of Domicile:
   Country: ___________________________
   Town/Village: _______________________
   Street/Ward: _________________________
   Plot/House No: _______________________

7. Occupation: __________________________
   Qualifications: _______________________

8. Proposed Length of Stay on whether traveling in transit without break of journey: ________ days.

9. Reasons in full for wishing to travel to the Republic of Botswana
   (Satisfactory evidence will be required as to the object of the proposed journey. Employees of firms or persons acting on behalf of firms must produce certificates from their employers as to the nature and physical address of the business on which they are proceeding abroad. Bankers reference may be required):
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
10. Requested Validity Period of Visa  
   From: D D M M Y Y Y Y  
   To: D D M M Y Y Y Y  

11. References in Country of Destination (with Names, Physical Address, Telephone No, Residence Permit No, ID No):  
   (1)  
   (2)  

12. Please indicate what money or cash (amount) will be at your disposal during your visit:  
   USD  
   EUR  
   ZAR  
   Other: ......................  

13. Particulars of Passport or other travel documents which should be submitted with this Application.  
   Number:  
   Place of Issue:  
   Date of Issue:  
   Date of Expiry:  
   Valid Until:  
   Return Visa to:  

14. Preferred method of communication:  
   E-mail  
   SMS  
   Post  
   Cell phone Number:  
   Telephone Number:  
   Present Postal Address:  
   Country:  
   Town/Village:  
   Post Office Location:  
   P.O. Box/P. Bag:  

I DECLARE that the above particulars given by me are true in substance and in fact.  
   Date:  
   Signature of Applicant:  

AT LEAST FOURTEEN DAY’S NOTICE should be given for each application.  

NOTE: Any visa granted on this application will be subject to compliance with the Immigration Regulations of the Republic of Botswana.