



Photo

Stamp embassy
Or Consulate

Visa Application for Côte d'Ivoire

Reference no.:

1. Surname(s) family name(s)	
2. Surname(s) at birth (earlier family name(s))	
3. First names (given names)	
4. Date of birth (year-month-day)	5. ID-number (optional)
6. Place and country of birth	
7. Current nationality/ies	8. Original nationality (nationality at birth)
9. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	10. Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other
11. Father's name	12. Mother's name

13. Type of Passport: <input type="checkbox"/> National Passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Travel document <input type="checkbox"/> Seaman's passport <input type="checkbox"/> Other travel document (please specify):.....	
14. Number of passport	15. Issued by
16. Date of issue	17. Valid until
18. If you reside in a country other than your country of origin, do you have permission to return to that country? <input type="checkbox"/> No <input type="checkbox"/> Yes, (number and validity)	
*19. Current occupation	
*20. Employer and employer's address and telephone number. For students, name and address of school.	

21. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple Entries	22. Duration of stay Visa is required for: _____ days
23. Other visas (issued during the past three years) and their period of validity	
24. In the case of transit, do you have an entry permit for the final country of destination? <input type="checkbox"/> No <input type="checkbox"/> Yes, valid until: _____ Issuing authority: _____	

* The questions marked with * are mandatory.

25. Purpose of travel <input type="checkbox"/> Tourism <input type="checkbox"/> Business <input type="checkbox"/> Visit to Family or Friends <input type="checkbox"/> Cultural/Sports <input type="checkbox"/> Official <input type="checkbox"/> Medical reasons <input type="checkbox"/> Other (please specify):
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*26. Date of arrival	*27. Date of departure
28. Border of first entry or transit route	29. Means of transport

*30. Name of host or company in Côte d'Ivoire and contact person in host company. If not applicable, give name of hotel or temporary address in Côte d'Ivoire	
Name	Telephone and telefax
Full address	email address

*31. Who is paying your cost of travelling and for your cost of living during your stay? <input type="checkbox"/> Myself <input type="checkbox"/> Host/person/s <input type="checkbox"/> Host company (State who and how and present corresponding documentation)
*32. Means of support during your stay <input type="checkbox"/> Cash <input type="checkbox"/> Travellers' cheques <input type="checkbox"/> Credit Cards <input type="checkbox"/> Accommodation <input type="checkbox"/> Other: <input type="checkbox"/> Travel and/or health insurance. Valid until:

33. Spouse's family name	34. Spouse's family name at birth	
35. Spouse's first name	36. Spouse's date of birth	37. Spouse's place of birth
38. Children (Applications <u>must</u> be submitted separately for each passport)		
Name	First name	Date of Birth
1.....
2.....
3.....

<p>49. I am aware of and consent to the following: any personal data concerning me which appear on this visa application form will be supplied to the relevant authorities in Côte d'Ivoire and processed by those authorities, if necessary, for the purposes of a decision on my visa application. Such data may be input into, and stored in, databases accessible to the relevant authorities in Côte d'Ivoire.</p> <p>At my express request, the consular authority processing my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have them altered or deleted, in particular, should they be inaccurate, in accordance with the national law of the state concerned.</p> <p>I declare that to the best of my knowledge all particulars supplied by me are correct and complete.</p> <p>I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of Côte d'Ivoire which deals with the application.</p> <p>I undertake to leave the territory of Côte d'Ivoire upon the expiry of the visa, if granted.</p>	
40. Applicant's home address	41. Telephone number
42. Place and date	43. Signature (for minor signature of custodians/guardian)