



STATE OF ERITREA
DEPT. OF IMMIGRATION & NATIONALITY
APPLICATION FOR ENTRY VISA
TO BE FILLED BY A HOST PERSON OR ORGANISATION

IMMIGRATION IDENTITY No. _____

HOST PERSON OR ORGANISATION IN ERITREA _____

INFORMATION ABOUT THE PERSON INVITED

1. FULL NAME (AS IN PASSPORT) _____

2. SEX _____

3. FORMER/OTHER NAME (If different from above) _____

4. PLACE OF BIRTH:- COUNTRY _____ CITY OR TOWN _____ 4.1 DATE OF BIRTH ____/____/____

5. OCCUPATION _____ 6. PRESENT NATIONALITY _____ 6.1 NATIONALITY BY BIRTH _____

OTHER NATIONALITIES IF ANY _____

7. PASSPORT:-TYPE _____ 7.1 NUMBER _____ 7.2 PLACE OF ISSUE _____

7.3 DATE OF ISSUE ____/____/____ 7.4 DATE OF EXPIRY ____/____/____

8. PERMANENT ADDRESS:-

COUNTRY _____ CITY/TOWN _____ STREET _____ HOUSE NO. _____ TEL. _____

9. ADDRESS IN ERITREA:- CITY/TOWN _____ STREET _____ HOUSE No. _____ TEL. _____

10. ADDRESS OF HOST ORGANISATION OR PERSON IN ERITREA:-

CITY/TOWN _____ STREET _____ HOUSE NO. _____ TEL. _____

11. PURPOSE OF ENTRY:-
☐ TOURISM ☐ OFFICIAL ☐ BUSINESS ☐ EMPLOYMENT
☐ STUDENT ☐ FAMILY VISIT ☐ TRANSIT ☐ OTHER

11.1 IF BUSINESS PLEASE GIVE DETAILS _____

12. ENTRY DESIRED ☐ SINGLE ☐ MULTIPLE

13. PERIOD OF STAY _____

14. PERSONS TRAVELLING ON THE SAME PASSPORT

NO.	NAME	SEX	DATE OF BIRTH			PLACE OF BIRTH
			DATE	MONTH	YEAR	

15.1 THE REPRESENTATIVE OF THE HOST ORGANISATION OR INDIVIDUAL PERSON DECLARE THAT THE INFORMATION GIVEN ABOVE IS CORRECT AND COMPLETE.

NAME _____ DATE ____/____/____ SIGNATURE _____

16. FOR OFFICIAL USE ONLY

DECISION TAKEN _____

ENTRY VISA No. _____ REMARK _____

DARE ____/____/____ NAME OF AUTHORITY _____ SIGNATURE _____