

ፎርም ቁጥር } B623
Form No. }

ሃገረ ኢርትራ
STATE OF ERITREA
ክፍሉ ኢሚግሬሽንን ዜግነትን
DEPT. OF IMMIGRATION & NATIONALITY
መሕትት ንመጻተዊ ቪዛ
APPLICATION FORM FOR ENTRY VISA

ቁጽረ መለያዬ ኢሚግሬሽን
IMMIGRATION IDENTITY No.

1 ምሉእ ስም (ከም ፓስፖርት) FULL NAME (AS IN PASSPORT)		2 ጾታ/SEX <input type="checkbox"/> ተባ MALE <input type="checkbox"/> አን FEMALE	
3 አቅዲሙ ዝነበረ ወይ ካልእ ስም (ዝተፈለየ) FORMER/OTHER NAME (If different from above)			
4 ቦታ ልደት PLACE OF BIRTH	ከተማ CITY OR TOWN	ዕለት ልደት DATE OF BIRTH	5 ስራሕ OCCUPATION
6 ህልዊ ዜግነት PRESENT NATIONALITY		7 ዓይነትን ቁጽረን ፓስፖርት PASSPORT TYPE & No.	
8 ፓስፖርት ዝተዋህበሉ ቦታ PLACE OF ISSUE OF PASSPORT		8.1 ፓስፖርት ዝወድቀሉ ዕለት DATE OF EXPIRY OF PASSAPORT	
9 ቀዋሚ ኣድራሻ PERMANENT ADDRESS:		ሃገር/COUNTRY	ከተማ CITY OR TOWN
		ጎደናን ቁጽረ ገዛን STREET AND NUMBER	ቁ. ቴሌፎን TEL. No.
10 ኣድራሻ ኣብ ኢርትራ ADDRESS IN ERITREA		ከተማ CITY OR TOWN	ቁ. ቴሌፎን TEL. No.
		ጎደናን ቁጽረ ገዛን STREET AND NUMBER	
11 ብዛዕባ ኣታተ/ት ዝሕጎት ሰብ/አካል REFERENCE IN ERITREA			
ኣድራሻ ADDRESS		ከተማ CITY OR TOWN	ቁ. ቴሌፎን TEL. No.
		ጎደናን ቁጽረ ገዛን STREET AND NUMBER	
12 ምክንያት መጻተዊ PURPOSE OF ENTRY			
<input type="checkbox"/> ቡድን TOURISM <input type="checkbox"/> ወግዓዊ OFFICIAL <input type="checkbox"/> ባዒን BUSINESS <input type="checkbox"/> ስራሕ EMPLOYMENT <input type="checkbox"/> ትምህርቲ STUDENT <input type="checkbox"/> ዘመድ ምብጻሕ FAMILY VISIT <input type="checkbox"/> ካልእ OTHER			
13 ዝድለ መጻተዊ ENTRY DESIRED		14 ዝጸንሓሉ ግዜ PERIOD OF STAY:	
<input type="checkbox"/> ንጽል SINGLE		<input type="checkbox"/> ብዙሕ MULTIPLE	
15 ኣስማት ብሓደ ሰነድ ዝገቡ PERSONS TRAVELLING ON THE SAME PASSPORT:			
ተ.ቁ No.	ስም NAME	ጾታ SEX	ዕለተ ልደት DATE OF BIRTH
			ዕለት DATE
			ወርሒ MONTH
			ዓመት YEAR
			ቦታ ልደት PLACE OF BIRTH
16 አን CORRECT AND COMPLETE			
ኩሉ ዝሃብኩም ኣበራታ ቅጥዕን ምሉእን ምዃኑ ኣረጋግጹ። DECLARE THAT THE INFORMATION GIVEN ABOVE IS			
ቦታ PLACE		ዕለት DATE	ክታም SIGNATURE
17 ንዝግል መዚ ጥራይ ዝምልከት / FOR OFFICIAL USE ONLY			
ዝተወሰደ ውሳኔ DECISION TAKEN			
ቁ. መጻተዊ ቪዛ ENTRY PERMIT No.			
ርእይቶ REMARKS			
ዕለት DATE	ስም ብዓል መዚ NAME OF AUTHORITY	ክታም ብዓል መዚ / SIGNATURE OF AUTHORITY	



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 NATIONALITY IF ANY _____ 4. DATE OF BIRTH ____ / ____ / ____

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

7. APPLICANT'S CONTACT

7.1. ADDRESS:- _____ 7.2 PHONE:- _____

8. REFERENCE IN ERITREA

8.1. NAME _____ 8.1. PHONE:- _____

9. APPLICANT SIGNATURE _____ 9.1. DATE ____ / ____ / ____

FOR OFFICIAL USE ONLY

10. አብ ላዕሊ መጽተዊ ሺዛ ክወሃቦ ዝሓትት ተገልጋሊ ዝተገብረ ደቂቕ ምጽራይ፡ ማለት ብዘይካኑ ብወግዒ ንምጽታው ዘቕርቦ ምክንያት ካልእ ዕላማ ከይህልዎ ዝፍትሽ እዩ። እዚ ክፋል'ዚ ብትግርኛ ወይ ብዓረብ ክምላእ ይከእል።

N.B. passport copy should be attached with this form

Official Stamp
↓

Name of Authority

Signature of Authority

