



**EMBASSY OF THE REPUBLIC OF LIBERIA**

PHOTO

DIPLOMATIC /OFFICIAL /REGULAR VISA

NAME(First/ Middle Initial/Last )

Street Address/Suite N°

City/State/zip

Telephone

Email Address

Date of Birth

Place of Birth(City/ Country)

Nationality

Passport Number

Place Issued

Date Issued

Expiration Date

Visa Type Requested

Single (3 months)		
Multi (6 months)		Multi (1 year)

Proposed Travel Date

Length of Stay

Purpose of Trip	Business	Tourism	Employment
	Official	Diplomatic	Other

If "Other" please explain

Is this your first visit to Liberia	Yes	No
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Reference 1:	
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Employer telephone	
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Street Address	
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City/State/Zip	
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Telephone	
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Reference 2:	
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Employer telephone	
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Street Address	
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City/State/Zip	
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Telephone	
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I declare under penalty of perjury all of the following:

- 1) I am a citizen or non-citizen national of the Republic of Liberia. The statements made on the application are true and correct;
- 2) I have not knowingly and wilfully made false statements or included false documents in support of this application; and
- 3) the photograph submitted with this application is a genuine, current photograph of me. I fully understand that any misleading information given will immediately disqualify me from obtaining a Visa.

Signature of Applicant	
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For Embassy Use only	Visa N°	
	Issued	
	Expiration	
	Approved by	