

DEPARTMENT: HOME AFFAIRSREPUBLIC OF SOUTH AFRICA

APPLICATION FOR VISA OR TRANSIT VISA

[Section 7 (1) (g) read with sections 10A and 10B; Regulation 8 (1)]

Failure to complete this application form in full may result in the visa being delayed or refused.

Please use block letters and black ink only.

PERSONAL PARTICULARS

Surname		· · · · · · · · · · · · · · · · · · ·		·····				
First names (in full)			***************************************					
Maiden name								
Previous surname(s)				P				
	YY	YY	′ M	М	D	D		
Date of birth							City of birth	
Country of birth				*****		*********	**************	
Gender	Male		Fem	ale				
Nationality	***************************************					•••••		by naturalisation, state original nationality
Where and when	was prese	ent na	tionalit	y ob	taine	d		
Passport/Travel [Document	Numb	er				•••••••••••	Issuing authority
Type of documen	t: Diploma	itic/Of	ficial/(Ordin	nary 1	⊃ass¦	cort/Travel	Date of expiry
Document/other	(Specify)			*******				
Permanent reside	ential addr	ess	***********	,	.,,,,,,,,	**********	.417511111111111111111111111111111111111	
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									7-	Tele	phone	e number() (c	ode)		
Period resident at	this a	addre	ss		************						,,		(number)		
Country of perma	nent r	eside	nce			••••			[Period resident in that country						
***************************************			,,,,,,,,	*******	************	••••	***************************************	***********		•••••				***************************************		
Occupation or pro	fessio	on	/**/::**			••••	***************************************		••••••				***************************************			
Name, address as that you attend or	nd tele	ephon	ne no	o, of	employe	∍r, i	univers	sity, org	anis	sati	on, et	c. to which	you are	attached, o	or	
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If self-employed,	state r	name	, add	dres	s, teleph	one	e no. a	ind nati	ure	of b	ousine	\$S				
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Marital status	Ne mar				Married	1		Wido	wed	d		Separated		Divorced		
First name(s) of s	pouse	€														
Maiden name								******								
Maidor Haine	Y	Υ	J Y I	Υ	MM]	d c				·····					
Date of birth								Nation	nalit	y						
NB: SEPARATE AND CHILDREN	FORM	IS M	UST	BE	COMPL	ET	ED IN	RESPI	ECT	0	F PEF	SONS OV	ER THE	AGE OF 1	16	
Particulars of chil				*****								IN PASSPO	JRIS	······································		
Surna							me(s)	zinpany			of bir	th	Place	of birth		
(1)					***************************************											
(2)										.,,	**********		**************	***************************************		
(3)																
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(4)							************	**********						*************************	*********	
VISIT TO SOUT								·								
Expected date o	f arriv	al in t	he F	Repu	ıblic Y	••••		M	······			[)			
Place of arrival		•••••	··		•		************	***********	• • • • • • • • • • • • • • • • • • • •	•••••	******	17471111100404444444444	******	*****************	*********	
Purpose of visit																
Duration of stay																
Number of entrie	es req	uired		•	<i>y - y *****</i>							.,	•••••		***********	
Single																
Multiple Two																
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Proposed residential address (p	hysical) in the Republic, including the full name(s) of your	host or h	otel	

Names of organisations or ne	rsons you will be contacting during your stay in the Re	enublic:		
Name		ationship		
			,	

			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Identity document number or po	armanent regidence normit number of Couth African heat			
identity document number of pe	ermanent residence permit number of South African host			
Indicate by means of an X wi	nichever is applicable			
	or a permit to settle permanently in South Africa?	yes	no	
	or refused entry into South Africa?	yes	no	
Have you ever been deported f	rom or ordered to leave South Africa?	yes	no	
Have you ever been convicted	yes	no		
Is a criminal action pending aga	ainst you in any country?	yes	no	,
Are you an unrehabilitated inso		yes	no	
Are you suffering from tubercule mental or physical deficiency?	osis or any other infectious or contagious disease or any	yes	no	
Have you ever been judicially d		yes	no	
practice of social violence or ra	erent to an association or organisation advocating the cial hatred or are you or have you been a member of an sing crime or terrorism to pursue its ends?	yes	no	
Give particulars if reply to one	or more of the questions above is in the affirmative:	<u> </u>	l	
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	ts applying for visitor's permits exceeding three month endant minor child of the holder of a permit issued in terms		opo 11	10
14, 15, 17, 19 or 22, submissio	n of a marriage certificate or an unabridged birth certificate	6 01 SE CU 8.	ons II,	13,
Proof of academic sabbatical, i	f applicable.			
	ntary or charitable activities to be undertaken, if applicable).		
Proof of research to be underta				
Proof of funds available for sub	sistence during period of visit.			
To be completed by applican	ts applying for diplomatic, official or courtesy visas:			
In the case of an official visit, s				

In the case of a diplomatic placing in the Republic, proof of such placing.

To be completed only by passengers in transit to another country:
Destination after leaving the Republic
Mode of travel to destination
Intended date and port of departure from the Republic to that destination
Do you hold a visa or permit for temporary or permanent residence in the country of your destination? (Proof
must be submitted)
To be completed by persons wishing to work in the Republic Yes No
If the answer is yes, please provide details
I SOLEMNLY DECLARE THAT THE ABOVE PARTICULARS PROVIDED BY ME ARE TRUE IN SUBSTANCE AND IN FACT AND THAT I FULLY UNDERSTAND THE MEANING THEREOF. I FURTHER DECLARE THAT I DO NOT CONTEMPLATE CHANGING THE PURPOSE OF MY VISIT WHILST IN THE REPUBLIC.
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Signature of applicant Date
Signature of applicant Date
Signature of applicant Date
Signature of approach
FOR OFFICIAL USE ONLY
Signature of approach
FOR OFFICIAL USE ONLY Approved/not approved by
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