Islamic Republic of Afghanistan
Visa Application Form

Personal Details	
Title:	
Family Name:	
Given Names:	
Father's Full Name:	
Date of Birth (Gregorian): DD / MMM / YYYY	
Country of Birth:	
Marital Status: ☐ Single ☐ Engaged ☐ Married ☐ Separated ☐ Widow / Widower	
Gender: ☐ Female ☐ Male	
Child: (Under 18 Years) ☐ Yes ☐ No	
Country of Residence:	
Nationality:	
Other Nationalities:	
Contact Details	
Current Address:	
Email Address:	
Mobile:	Work Tel:
Home Tel:	Fax:
Employment Details	
Current Occupation:	
Employer's Name:	
Employer's Address:	
Previous Employer's Name:	
Previous Employer's Address:	

Visa Details			
Visa Type:			
Purpose of Journey:	☐ Business ☐ Exhibition	☐ Convention / Conference ☐ Visiting Friends / Family	☐ Education ☐ Holiday ☐ Employment ☐ Other
Entry Date:		Point of Entry:	
Intended Duration of Stay (days):		Number of Children Accompanied:	
Places in Afghanistan intended to visit:			
Complete Address in Afghanistan:			
Have you ever visited Afghanistan before? *If yes, please provide details:*		☐ No	☐ Yes
Have you applied for an Afghanistan Visa before? *If yes, please provide details:*		☐ No	☐ Yes
Do you have a criminal record? *If yes, please provide details:*		☐ No	☐ Yes
Passport Details			
Passport Type:			
Passport Number:			
Place of Issue:			
Issue Date:			
Expiry Date:			
I declare that the information provided in this application is true and correct			

Signature: *(please sign within the box)*

Date: DD / MMM / YYYY

Passport Photograph: *(Please Attach Within The Square Below).*
Note: The photograph must comply with the attached guidelines.

Please Attach Photo Here	***Guarantor must endorse the photo*** *This is a true photo of:* --- *(name of applicant)* --- *(signature of guarantor)*

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OFFICE USE ONLY
Receiving Office:
Application Details:
Date Application Received:
Date of Application:
Visa Type:
Comments:
Observations:
Passport Details
Name:
Passport Number**:**
Issued By**:**
Visa Issued: ☐yes ☐ no
Visa Number:
Visa Serial Number:
Issued by:
Issuing office:
Date:
Collected by / Sent to: ***(note, if collected by someone other than the applicant, written authorisation must be provided by the applicant and retained on file)***