GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR MINISTRY OF IMMIGRATION AND POPULATION DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION **IMMIGRATION DEPARTMENT** APPLICATION FOR ENTRY TOURIST VISA

		Photo 2x2		
1. Name in full (in Block	1. Name in full (in Blocks Letters)			
2. Father's name in full _		background		
3. Nationality	4.Sex			
5. Date of birth	6. Place of Birth			
7. Occupation				
8. Personal Description				
(a) Color of Hair	(b) Height			
(c) Color of eyes	(d) Complexion			
9. Passport				
(a) Number	(b) Date of issue			
(c) Place of issue	(d) Issuing authority			
(e) Date of expiry				
10. Address in U.S. and Te	el No			
11. Address in Myanmar				
12. Purpose of entry into M	Ayanmar			
13. Attention for Applica	nts			
(a) Applicant shall abi	de by the law of the Republic of the Union of I	Myanmar.		
(b) Legal actions will	be taken against those who violate or contra	avene any provision of the		
existing laws, rules	and regulations of the Republic of the Union	of Myanmar.		
I hereby declare that I fully unde	rstand the above mentioned conditions, that the pa	articulars given above are true		
and correct.				
Date:	: Signature of Applicant			
	(FOR OFFICIAL USE ONLY)			
	Date			
Visa Authority Date				
Date				

Place New York

Permanent Mission of the Republic of the Union of Myanmar to the Union, New York

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CONSULATE GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR, NEW YORK Work History for Visa Applicant

		(First Name) (Middle Nar	/ne) (Last Name)	Photo 2x2 inches white background
		of birth//		
		e of Birth		
4.		al Zone)	partment Number, Street, City, State	or Province &
5. 7	-	one Number		
			Work:	
6.		k Description- Current:		
	(a)		From-To (mm/yy)	
	(b)			
	(c)	Describe your Duties :		
7.	Worl	k Description- Previous:		
	(a)	Job Title:	From-To (mm/yy)	
	(b)	Office/Section/Division		
	(c)	Describe your Duties :		
8.	Worl	k Description- Previous:		
	(a)	Job Title:	From-To (mm/yy)	
	(b)	Office/Section/Division		
	(c)			

I hereby declare that the particulars given above are true and correct.

Signature of Applicant

Date: _____