



Passport
size photo
here.

UGANDA VISA APPLICATION FORM

Uganda Embassy
5911 16th Street North West
Washington, DC 20011
Tel: +1(202)726-7100
Fax: +1(202) 726-1727
Email: washington@mofa.go.ug

This form must be fully completed in English using blue or black ink. Please attach one (1) passport size photograph.

Part 1 **General information**

Type of visa required: *Put a cross (x) in the relevant box.*

Tourist Business Employment EAC Visa
Official Student Other

If other (Please Explain)

Validity of visa: *Put a cross (x) in the relevant box*

Single Entry (3 months) Multiple Entry (6 Months) EAC (3 months multiple)

What is the purpose of your visit to Uganda?

How long will you stay in Uganda?

From (DD/MM/YYYY)

To

Travel Dates:

What is your date of travel? DD/MM/YY

Which date will you leave Uganda? DD/MM/YY

Part 2

Personal Details

Given Names (as shown in your passport)

Family name (as shown in your passport)

Other names (include all previous names used)

Sex (Put a cross (x) in the relevant box)

Male

Female

**Current Occupation and
Employer's Contact address**

(Physical address, Phone and E-mail address)

Previous Occupation

(Physical address, Phone and E-mail address)

Marital Status (Put a cross (x) in the relevant box)

Single Married Divorced/Separated Widowed

Date of Birth (DD/MM/YYYY)

Place of Birth

Country of Birth

Nationality

Part 3

Contact Details

Give your U.S residential address

Details of contact person, OR Hotel address and telephone Number in Uganda.

(Physical address, Phone and E-mail address)

(Physical address, Phone and E-mail address)

Part 4

Passport Information

Type of Passport

(Put a cross (x) in the relevant box.)

Diplomatic Official Ordinary Travel document

Current Passport Number

Place of issue

Issuing Authority

Date of issue (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
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Date of Expiry (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
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Part 5

Previous Applications

Have you travelled to Uganda in the past 3 years?

Yes No

If 'Yes' please provide details in the box below.

Date	
Destination	
Purpose	
Duration	

Part 5

Declaration

The information I have given in this form is complete and true to the best of my knowledge and the attached photograph is a true likeness of me.

Signature

Date (DD/MM/YYYY)

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D	D
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M	M
---	---

Y	Y	Y	Y
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PLEASE NOTE:

This process is not an automatic qualification to obtain a VISA. The consular office reserves the right to deny or issue the Visa after a thorough review of your submitted paperwork.

Part 7	Official Use Only
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Amount Paid (\$)		Money Order No.	
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Type of Visa issued

SINGLE (3 Months) MULTIPLE (6 Months) GRATIS DIPLOMATIC

VISA NUMBER	DATE OF ISSUE

Authorizing Officer									
Signature									
Date	<table border="1"><tr><td>D</td><td>D</td></tr></table> <table border="1"><tr><td>M</td><td>M</td></tr></table> <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
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