

Application for Ghana Entry Permit/Visa REGULAR SERVICE Embassy of Ghana Washington DC.

| | | | | | | | 0 | | | | |
|---|----------------|-------------|---------------------------|-------------------|---|--|-------------------|----------------|------------------|--|--|
| For Official Use Only | | | | | | | | | | | |
| Visa No.: | Attach recent | | | | | | | | | | |
| Type of Visa: | | | | | passp | | | | | | |
| Date of Issue: | | | | | photo | gr | aph here | | | | |
| Issuing Officer: | | | | | | | | | | | |
| Charges: | | | | | | | | | | | |
| | | | | | | | | | | | |
| Single Entry \$60.00 | | | | | | FILL WITH BLACK INK ONLY 1. The form must be completed in block/ | | | | | |
| Multiple Entry | \$100.00 | | | | capital letters and submitted together with | | | | | | |
| NO PERSONAL | | KS | | | two(2) recent passport size photographs. | | | | | | |
| 1. Personal Informat | | | | | 2. Passport Information | | | | | | |
| a. Surname /Last Name | | | | | | a. Passport Number | | | b. Date of Issue | | |
| | | | | | | 1 | | | | | |
| b. First Name(s) | d. Middle Name | | | c. Place of Issue | | | e. Date of Expiry | | | | |
| c. Previous Name (if applicable) | | | | | | 3. Name and Address of Employer/School (USA) | | | | | |
| c. 1 Tevious Traine (ii a | іррпсаоі | <i>C)</i> | | | 00100 | | 1100010000 | | | | |
| e. Date of Birth | f Pla | ace of Birt | h | | a. Profession/Occupation | | | | | | |
| c. Date of Birth | | | | | a. Troression occupation | | | | | | |
| g. Nationality h. Former Nationality (if any) | | | | | | NOTE: If retired or currently unemployed, please state the | | | | | |
| 1 Desidential Address | | | | | address d employe | | telephone nu | mber of last/p | previous | | |
| 4. Residential Address a. Street/ Mailing Address: | | | | | | b. Street/Mailing Address: | | | | | |
| a. Street Maining Add | 11088. | | | | 0. 50 | | u waning A | duicss. | | | |
| b. City: | С | State d. | 7ir | Code: | | | | | | | |
| o. City. | | State a. | . Z ı _l | couc. | c. Cit | v | | d. State: | e. Zip Code: | | |
| e. Home Phone No.: | | | | | 0.01 | J | | d. State. | c. Zip code. | | |
| f. Cell Phone No. | | | | | | en | hone Numb | l per: | | | |
| g. Emergency Contact | t Person: | (Full Nar | ne) | | 1 | -1- | | | | | |
| 8 | | (= |) | | Your | Er | nail Addres | SS: | | | |
| h. Contact Person's Ph | one No. | i. Re | latio | onship | - | | | | | | |
| Applicant's intended of | late of tr | avel | | Is app | licant in | n p | ossesion of | roundtrip | | | |
| | | | | ticket' | ? | | | | | | |
| Amount of money Ap | plicant i | s travellin | g | If (yes | s) Indica | ate | ticket num | ber: | | | |
| with | | | | | | | | | | | |
| Traveling by: | Air | | | Sea | | | Land | | | | |



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Embassy of Ghana Washington DC

| Pı | ırpose | of Jou | ırney | 7 : | | | | | | | | | |
|--|---|---------------------|--------|-----------------------|-------------|----------------------------|--|-----------------|------------|-----------|--------------|-------|--|
| | Busin | ess | П | ourism | Employ | ment | Offic | cial | Transi | t | Student | Other | |
| 5. | Name | , Add | ress | and Tele _l | phone Numbe | er of Lod | <u> </u> | | | | | | |
| a. Name of Hotel/Guest House in Ghana | | | | | | f. C | f. Contact Person in Ghana, Name and Address | | | | | | |
| b. Street (Mailing address) | | | | | g. \$ | g. Street(Mailing address) | | | | | | | |
| (| c. City/ | City/Town d. Region | | | | h. (| h. City/Town | | | i. Region | | | |
| e. Telephone Number | | | | | | | j. T | j. Tel. Number: | | | | | |
| 6. If you select employment, indicate name and add | | | | | | | | 1 - | | | | | |
| a. Name of Employer | | | | | | | | | | | | | |
| | o. Addı | | | | | | | | | | | | |
| - | e. City/ | Town | | (| l. Region | | e. Telephone Number | | | | | | |
| 7. | Durat | ion of | stay | in Ghana | 1 | | | 8. | Date of la | ast vi | isit to Ghar | na | |
| | | | • | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | 9. For Tourism, list at least two(2) areas of interest, or indicate in writing purpose of journey if you selected Other | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| Applicant's Signature: | | | | | | Date | of A | pplication | n: | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| For mailing: Use Address Below: | | | | | | | | | | | | | |
| | Visa Pı | | _ | | | | | | | | | | |
| | Embas: 2512 14 | • | | a l Drive N | W | | | | | | | | |
| Ι - | 8512 II Washir | | | | ** | | | | | | | | |
| | TUBILL | ·S. · · · · | J U. 2 | | | | | | | | | | |