



**THE REPUBLIC OF UGANDA
VISA APPLICATION**

SERIAL NO : (Please do not write in this space, for official use only)

1. Last Name (Family Name):

2. Other Given Names:

3. Former Name(s) if applicable:.....

4. Permanent Address:

.....

a. Telephone No (s): Home: ()Work: ()

Cell phone (optional): ().....

b. E-mail address:

5a. Nationality:..... 5b. Current Occupation:.....

6. Date and Place of Birth/...../.....
Day Month Year Place of Birth

7. Marital Status: (check/tick one): Married Single Divorced

8. Other family members accompanying applicant:

(N.B. Each traveling family member must have a separate application filled out for them)

Name	Date of Birth	Passport number
Spouse.....		
Child.....		
Child.....		
Child.....		

9. Passport No:..... Date of Issue...../...../..... Expiry date...../...../.....
Day Month Year Day Month Year

Type of Passport (check/tick one) Diplomatic Official Ordinary

10. Type of Visa required (check/tick one)

Transit Single Entry Multiple Entry (Six Months) Multiple Entry (12 Months)

11. Category of Visa (check/tick one)

Tourist Holiday visit Business Student Govt. Business

12. Proposed Date of Arrival in Uganda:/...../.....
Day Month Year

Planned duration of Stay in Uganda:

13. Reason for the Journey:

14. Date(s) of any Previous Visit(s) to Uganda:

15. Any contact person in Uganda:

a. Name:
First Last/Family Name

b. Phone: c. email:.....

16. Full address where you intend to stay while in Uganda:
.....

17. If in Transit:

a. Indicate your ultimate destination:

b. Have you obtained a visa for country of destination?

Applicant's Signature: Date:/...../.....
Day Month Year

Submit Application to:
The Consular Officer
Embassy of the Republic of Uganda
5911 16th Street NW
Washington DC 20011