

FOR OFFICIAL USE

Visa No. _____

Type of Visa _____

Date of Issue _____

Charges _____

Signature of Issuing Officer _____

PLEASE CHECK ONE:

Single Entry:

Multiple Entry:

Single Entry (RUSH):

Multiple Entry (RUSH):

AFFIX
PASSPORT PICTURE
HERE

Application for Ghana Entry Permit/Visa

GHANA CONSULATE, NEW YORK

19 East 47th Street - New York, NY 10017 Tel: (212) 832-1300

INSTRUCTIONS:

1. This form must be completed in Quadruplicate and in Capital Letters and submitted (together with Four (4) recent Passport size pictures) within at least three (3) days before the intended date of departure.
2. Full names and Addresses of references in Ghana should be stated (including Telephone Number, if available).
3. Any information stated on the Form and subsequently found to be incorrect may render Entry Permit/Visa void.
4. Applicants applying by post should provide Self-Addressed stamped envelopes.

1. (a) Surname _____ First Name(s) _____

Previous Name (if applicable) _____

(b) Date of Birth _____ (c) Place of Birth _____

(d) Nationality _____ (e) Former Nationality (if any) _____

(f) Passport No. _____ (g) Date of Issue _____

(h) Place of Issue _____ (i) Date of Expiry _____

2. Profession/Occupation _____

3. (a) Business Address & Tel. No. _____

(b) Residential Address & Tel. No. _____

4. Proposed Date of Departure for Ghana _____

5. (a) Traveling by: Air _____ Sea _____ Land _____

(b) Is applicant in possession of return ticket? Yes No Ticket No. _____

(c) Financial means at Applicants disposal _____

6. Purpose of Journey: Business _____ Tourism _____ Employment _____ Official _____

7. Name, Address and Telephone Numbers of two (2) References in Ghana

(i) _____

(ii) _____

8. If for Employment, Name & Address of Employer in Ghana _____

9. Duration of Stay in Ghana _____

10. Date of Last Visit to Ghana _____

11. Applicant's Signature _____ Date of Application _____