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Embassy of the Hashemite Kingdom of Jordan 3504 International Drive, NW Washington, D.C. 20008

Visa Application

Fir	st Name:	Middle Initial:	Last Name:	
		Passport No:		
Bir	th Place:	Place issued:		
		Date Issued:		
Ori	iginal National	ity:	Occupation:	
Ad	dress:			
Pho	one No: (H)	Phone No:	(W)	
E-r	nail:			
Purpose of Trip:				
Port of entry:				
Expected date of departure from the US:				
Expected date of arrival in Jordan:				
Requirements:				
1.	Original passport must be valid for at least (6) months and enclosed with this application.			
2.	Single entry visa fees valid for 6 months (\$ 16.50).			
	Multiple entry visa fees valid for 6 months (\$ 31.50).			
3.	For business trips, a letter from employer stating the purpose of trip.			
4.	For diplomatic or official visas (No Fee) a letter of request from your department.			
5.	Visa processing takes approximately (5) business days for U.S. Citizens.			
6.	Only Money Orders accepted.			
•	Enclose a se	elf-addressed pre-paid (air bill) with a c	heck payable to Express or UPS, or DHL, to	
	return your Passport(s) Please don't use (Fed ex).			
	No more that	an (2) passports per air bill .		

WE WILL NOT BE RESPONSELE FOR ANY LOSS THAT MAY OCCUR DURING PROCES

Office Hours: from (10:00) a.m. to (2:00) p.m. Monday - Friday

Note:

Visa fees are not refundable

U.S. re-entry permits are not acceptable for travel to Jordan

Citizens of the United States, Mexico, South America, and the countries of Western Europe could be issued visas upon arrival at the airport in Amman-Jordan.

I certify that all the statements given by me are truthful, and I am aware of all regulations stated above.

Signature: _____

Date: _____