

CONSULATE GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR, NEW YORK

APPLICATION FOR TOURIST ENTRY VISA

1.	Name in Full (Fill in Blocks)	/ /		<b>PHOTO</b> <b>2x2</b>
	(First Name) (Middle Name) (Last Name)			
2.	Father's Name	/ /		
	(First Name) (Middle Name) (Last Name)			
3.	Date of Birth (dd/mm/yy)	/ /	4. Place of Birth	
5.	Nationality		6. Sex	<input type="checkbox"/> (F) / <input type="checkbox"/> (M)
7.	Occupation			
8.	Personal Description			
	(a) Color of Hair		(b) Height	
	(c) Color of Eyes		(d) Complexion	
9.	Passport			
	(a) Number		(b) Date of Issue (dd/mm/yy)	/ /
	(c) Place of Issue		(d) Issuing Authority	
	(e) Date of Expiry (dd/mm/yy)	/ /		
10.	Permanent Address			
11.	Contact Phone Number (Res.)	(Work)	(e-mail)	
12.	Address in Myanmar			
13.	Have you ever been to Myanmar? : Yes <input type="checkbox"/> No <input type="checkbox"/> (If Yes) Date of Last Visit : (dd/mm/yy)	/ /		
14.	Purpose of entry into Myanmar			
15.	Expected Date of Arrival : / /	Flight No.	Departure : / /	Flight No.
16.	Attention for Tourists:			

- (a) Apart from the professions mentioned in this visa application form, applicants are not to engage in any sort of work with or without changes.
- (b) Applicants shall abide by the Law of the Republic of the Union of Myanmar and shall not interfere in the Internal Affairs of the Republic of the Union of Myanmar.
- (c) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Republic of the Union of Myanmar.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

\_\_\_\_\_  
Signature of Applicant

Date : \_\_\_\_\_

\_\_\_\_\_  
(For Official Use Only)

Visa No. \_\_\_\_\_ Date \_\_\_\_\_

Visa Authority \_\_\_\_\_

\_\_\_\_\_  
Signature of Office-in-Charge

Consulate General of the Republic of the Union of Myanmar, New York.

Contact : Tel. (212) 744 1271 / 1275 Fax. (212) 744 1290  
e-mail : myanmarconsulateny@verizon.net

CONSULATE GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR, NEW YORK.

Work History for Visa Applicant

PHOTO  
2x2

1. Name in Full (Fill in Blocks)  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(First Name) (Middle Name) (Last Name)
2. Date of Birth (dd/mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_
3. Place of Birth \_\_\_\_\_
4. Permanent Home Address : (Include Apartment Number, Street, City, State or Province & Postal Zone)  
\_\_\_\_\_  
\_\_\_\_\_
5. Telephone Number  
Home : \_\_\_\_\_ Work : \_\_\_\_\_
6. Work Description – Current :
  - (a) Job Title : \_\_\_\_\_ From-To (mm/yy) \_\_\_\_\_
  - (b) Office/Section/Division \_\_\_\_\_
  - (c) Describe your Duties : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Work Description – Previous :
  - (a) Job Title : \_\_\_\_\_ From-To (mm/yy) \_\_\_\_\_
  - (b) Office/Section/Division \_\_\_\_\_
  - (c) Describe your Duties : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Work Description – Previous :
  - (a) Job Title : \_\_\_\_\_ From-To (mm/yy) \_\_\_\_\_
  - (b) Office/Section/Division \_\_\_\_\_
  - (c) Describe your Duties : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby declare that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant

Date : \_\_\_\_\_

THE REPUBLIC OF THE UNION OF MYANMAR

Immigration Department

REPORT OF ARRIVAL

Name \_\_\_\_\_ is directed to deliver this report to the immigration Authorities on arrival in Myanmar.

Passport No. \_\_\_\_\_

Place and Date of Issue \_\_\_\_\_

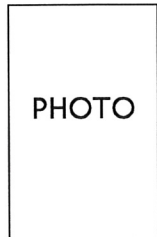
Visa No. and Date \_\_\_\_\_

Authority, if any \_\_\_\_\_

Full address in Myanmar \_\_\_\_\_

Name and Address of Reference \_\_\_\_\_

Or Guarantor in Myanmar \_\_\_\_\_



\_\_\_\_\_  
Signature of Passport Holder

Visa Issuing Officer

Date of Issue \_\_\_\_\_

Date of Departure from USA

Date of Arrival in Myanmar

Date of Expiry of Stay in Myanmar