

REPUBLIC OF ZAMBIA



ZAMBIA HIGH COMMISSION,
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VISA APPLICATION FORM

TYPE OF VISA REQUIRED: SINGLE:() TRANSIT:() DOUBLE:() MULTIPLE:() (tick)

1. Surname (in capitals):..... 2. Other names:.....

3. ADDRESSES: (a) Permanent:.....

(b) Present:.....

(c) Telephone:..... (d) E-mail:.....

4. OCCUPATION:.....

5. (a) Nationality..... (b) Race:.....

6. (a) Date of Birth:...../...../..... (b) Sex.....

(c) Town and Country of birth:...../.....

7. PASSPORT: (a) Number:..... (b) Date of expiry:/...../.....

8. (a) Date of entry into Zambia:/...../.....

(b) Possible length of stay in Zambia:..... (c) Purpose of visit:

9. Name and Addresses of firms or persons to be visited:.....

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10. Particulars of any previous residence in, or visits to Zambia:

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11. (a) Date of expected departure from Zambia:...../...../.....

(b) Next destination:.....

12. Signature of applicant:..... Date:...../...../.....

FOR OFFICIAL USE: Visa No:..... Fee paid:..... Receipt
Number:.....

Date of Issue:...../...../..... Approved by:..... Signature:.....