

## REPUBLIC OF KIRIBATI



VISA FEE: US\$25  
Payable to:  
Consulate of Kiribati

## VISA APPLICATION FORM TO ENTER KIRIBATI

[Made Under Sect. 20 of Passport VISA REGULATION 2 (2)]

NAME IN FULL \_\_\_\_\_  
SURNAME

GIVEN AND MIDDLE NAME

OTHER NAMES USED, IF ANY \_\_\_\_\_

SEX \_\_\_\_\_ MARITAL STATUS:  MARRIED  SINGLE

NATIONALITY OR CITIZENSHIP \_\_\_\_\_

DATE OF BIRTH: DAY \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

PLACE OF BIRTH: CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PASSPORT NUMBER \_\_\_\_\_  DIPLOMAT  OFFICIAL  ORDINARY

DATE PASSPORT ISSUED: DAY \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

PASSPORT ISSUED AT: CITY \_\_\_\_\_ COUNTRY \_\_\_\_\_

DATE PASSPORT EXPIRES: DAY \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY

STATE

ZIP CODE

HOME TELEPHONE NUMBER \_\_\_\_\_

NAME AND ADDRESS OF FIRM OR ORGANIZATION \_\_\_\_\_

BUSINESS TELEPHONE NUMBER \_\_\_\_\_

PRESENT PROFESSION OR OCCUPATION \_\_\_\_\_

PRINCIPAL FORMER POSITIONS \_\_\_\_\_

PURPOSE OF JOURNEY TO KIRIBATI \_\_\_\_\_

LENGTH OF STAY IN KIRIBATI \_\_\_\_\_

ROUTE OF PRESENT JOURNEY \_\_\_\_\_

PROBABLE DATE OF ENTRY \_\_\_\_\_

ADDRESS OF HOTELS OR NAMES OF PERSONS WITH WHOM APPLICANT INTENDS TO STAY \_\_\_\_\_

DATE AND DURATION OF PREVIOUS STAYS IN KIRIBATI \_\_\_\_\_

GUARANTOR OR REFERENCE IN KIRIBATI: NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ TEL. NO. \_\_\_\_\_

I HEREBY DECLARE THAT THE STATEMENTS ABOVE ARE TRUE AND CORRECT. Also, I understand that immigration status and period of stay to be granted are decided by the Immigration Authorities in Kiribati upon my arrival.

DATE: \_\_\_\_\_ SIGNATURE OF APPLICANT \_\_\_\_\_