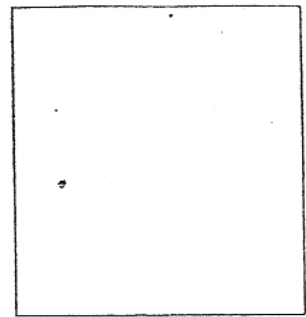


Visa No. ....  
Type of Visa .....  
Date of Issue .....  
Charges .....  
Counterfoil Rec. No. ....  
Signature of issuing Officer .....

*For Official Use*



**Application for Ghana Entry Permit/Visa**  
MISSION .....

**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) Travelling by: Air ..... Sea ..... Land .....
  - (b) Is applicant in possession of return ticket: ..... Ticket No. ....  
(c) Financial means at Applicant's disposal .....
  6. Purpose of Journey: Business ..... Tourism ..... Employment ..... Official .....
  7. Names & Addresses of two 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 .....

**Please complete and fax to 012 342 5863**