



# Application for a Visitor visa – Tourist stream

Please open this form using Adobe Acrobat Reader.  
Either type (in English) in the fields provided or print this form  
and complete it (in English) using a pen and BLOCK LETTERS.

Tick where applicable

**1** Indicate if you are applying outside Australia or in Australia:

Outside Australia  ► **Go to Question 2**

In Australia  ► **Go to Question 5**

### Applicants outside Australia

**2** When do you wish to visit Australia?

Date from 

DAY	MONTH	YEAR
/	/	/

 to 

DAY	MONTH	YEAR
/	/	/

**3** How long do you wish to stay in Australia?

Up to 3 months

Up to 6 months

Up to 12 months

**Note:** The stay period granted may be less than the period requested.  
You should check the terms of any visa granted.

**4** Do you intend to enter Australia on more than one occasion?

No  ► **Go to Question 7**

Yes  ► Give details


►► **Go to Question 7**

### Applicants in Australia

**5** Specify the date you wish to extend your stay to

DAY	MONTH	YEAR
/	/	/

**6** Provide detailed reasons for requesting this further stay


### PHOTOGRAPH

Please attach a recent passport size photograph of yourself.

### Part A – Your details

**7** Give the following details exactly as they appear in your passport  
*Make sure your passport is valid for the period of stay you are applying for.*

Family name

Given names

Sex Male  Female

Date of birth 

DAY	MONTH	YEAR
/	/	/

Passport number

Country of passport

Nationality of passport holder

Date of issue 

DAY	MONTH	YEAR
/	/	/

Date of expiry 

DAY	MONTH	YEAR
/	/	/

Place of issue/  
issuing authority

**8** Place of birth

Town/city

State/province

Country

**9** Relationship status

Married

Separated

Never married or  
been in a de facto  
relationship

Engaged

Divorced

De facto

Widowed

10 Are you or have you been known by any other name?  
(including name at birth, previous married names, aliases)

No

Yes  Give details

11 Do you currently hold an Australian visa?

No

Yes  **Note:** If this visa application is approved, your current visa may cease.

12 Have you applied for a Parent (subclass 103) visa?

No

Yes  Please provide your queue date

DAY	MONTH	YEAR
/	/	

13 Do you currently hold, or have you applied for, an APEC Business Travel Card (ABTC)?

No

Yes  **Note:** If this visa application is approved, the Australian visa associated with your ABTC will cease.

14 Are you a citizen of any other country?

No

Yes  List countries

15 Do you have other current passports?

No

Yes  Give details

Passport number

Country of passport

16 Do you hold an identity card or identity number issued to you by your government (eg. National identity card) (if applicable)?

**Note:** If you are the holder of multiple identity numbers because you are a citizen of more than one country, you need to enter the identity number on the card from the country that you live in.

No

Yes  Give details

Family name

Given names

Type of document

Identity number

Country of issue

17 In what country are you currently located?

18 What is your legal status in your current location?

Citizen

Permanent resident

Visitor

Student

Work visa

No legal status

Other  Give details

19 What is the purpose of your stay in your current location and what is your visa status?

20 Your current residential address

**Note:** A street address is required as a post office box address cannot be accepted.

Country

21 Address for correspondence

(If the same as your residential address, write 'AS ABOVE')

Country

22 Contact telephone numbers

Home 

COUNTRY CODE	AREA CODE	NUMBER
( )	( )	

Office 

COUNTRY CODE	AREA CODE	NUMBER
( )	( )	

Mobile/cell

23 Do you agree to the Department communicating with you by email and/or fax?

This may include receiving notification of the outcome of this application.

**Note:** We can communicate about this application more quickly using email and/or fax.

No

Yes  Give details

Email address

Fax number 

COUNTRY CODE	AREA CODE	NUMBER
( )	( )	

## Part B – Family travelling to Australia with you

24 Are you travelling to, or are you currently in, Australia with any family members?

No

Yes  ► Give details of each family member

*Make sure all the applications are lodged at the same time.*

Full name	Relationship to you	Name of sponsor (if applicable)

*If insufficient space, give details at Part O*

## Part C – Family NOT travelling to Australia with you

25 Do you have a partner, any children, or fiancé who will NOT be travelling, or has NOT travelled, to Australia with you?

No

Yes  ► Give details

Full name	Date of birth			Relationship to you	Their address while you are in Australia
	DAY	MONTH	YEAR		
	/	/			
	/	/			
	/	/			
	/	/			
	/	/			
	/	/			

*If insufficient space, give details at Part O*

## Part D – Details of your visit to Australia

26 Is it likely you will be travelling from Australia to any other country (eg. New Zealand, Singapore, Papua New Guinea) and back to Australia?

No

Yes  ► Attach itinerary details

27 Do you have any relatives in Australia?

No

Yes  ► Give details

Full name	Date of birth			Relationship to you	Address	Citizen or permanent resident of Australia
	DAY	MONTH	YEAR			
	/	/				No <input type="checkbox"/> Yes <input type="checkbox"/>
	/	/				No <input type="checkbox"/> Yes <input type="checkbox"/>
	/	/				No <input type="checkbox"/> Yes <input type="checkbox"/>
	/	/				No <input type="checkbox"/> Yes <input type="checkbox"/>

*If insufficient space, give details at Part O*



## Part E – Health details

**31** In the last 5 years, have you visited or lived outside your country of passport for more than 3 consecutive months?

*Do not include time spent in Australia.*

No

Yes  ► Give details

1. Country(s)

Date from  DAY MONTH YEAR / / to  DAY MONTH YEAR / /

2. Country(s)

Date from  DAY MONTH YEAR / / to  DAY MONTH YEAR / /

3. Country(s)

Date from  DAY MONTH YEAR / / to  DAY MONTH YEAR / /

*If insufficient space, give details at Part O*

**32** Do you intend to enter a hospital or health care facility (including nursing homes) while in Australia?

No

Yes  ► Give details

  
  
  


**33** Do you intend to work as, or study to be, a doctor, dentist, nurse or paramedic during your stay in Australia?

No

Yes  ► Give details

  
  
  


**34** Have you:

- ever had, or currently have, tuberculosis?
- been in close contact with a family member that has active tuberculosis?
- ever had a chest x-ray which showed an abnormality?

No

Yes  ► Give details

  
  
  


**35** During your proposed visit to Australia, do you expect to incur medical costs, or require treatment or medical follow up for:

- blood disorder;
- cancer;
- heart disease;
- hepatitis B or C and/or liver disease;
- HIV Infection, including AIDS;
- kidney disease, including dialysis;
- mental illness;
- pregnancy;
- respiratory disease that has required hospital admission or oxygen therapy;
- other?

No

Yes  ► Give details

  
  
  


**36** Do you require assistance with mobility or care due to a medical condition?

No

Yes  ► Give details

  
  
  


**37** Have you undertaken a health examination for an Australian visa in the last 12 months?

No

Yes  ► Give details (including HAP ID if available)

  
  
  


**Note:** If you are applying for a long stay Visitor visa or are 75 years or over, you will be asked to undergo a health assessment and may be asked to show that you have medical insurance to cover your intended stay in Australia. Please contact your nearest office of the Department for further advice before lodging your application. If additional medical consultations are required, a decision on your visa application will be delayed.





**41** Is your sponsor or someone else providing support for your visit to Australia?

**Note:** This includes support from an organisation.

No

Yes  Give details

Full name	Date of birth			Relationship to you	Their address while you are in Australia	Type of support provided		
	DAY	MONTH	YEAR			Financial	Accommodation	Other
	/	/				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	/	/				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	/	/				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	/	/				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If insufficient space, give details at Part O

Attach details. The person or people you have listed will need to provide evidence of their ability to provide this support.

**Part I – Previous applications**

**42** Have you ever:

- been in Australia and not complied with visa conditions or departed Australia outside your authorised period of stay? No  Yes
- had an application for entry to or further stay in Australia refused, or had a visa for Australia cancelled? No  Yes

If you answered 'Yes' to any of the above questions, give details


## Part J – Assistance with this form

**43** Did you receive assistance in completing this form?

No  ► **Go to Part K**

Yes  ► Please give details of the person who assisted you

Title: Mr  Mrs  Miss  Ms  Other

Family name

Given names

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
POSTCODE

Telephone number or daytime contact

COUNTRY CODE	AREA CODE	NUMBER
( <input type="text"/> )	( <input type="text"/> )	<input type="text"/>

Mobile/cell

**44** Is the person an agent registered with the Office of the Migration Agents Registration Authority (Office of the MARA)?

No

Yes  ► **Go to Part K**

**45** Is the person/agent in Australia?

No  ► **Go to Part K**

Yes

**46** Did you pay the person/agent and/or give a gift for this assistance?

No

Yes

## Part K – Options for receiving written communications

**47** All written communications about this application should be sent to:  
(Tick one box only)

Myself

**OR**

Authorised recipient  ► You should complete form 956A *Appointment or withdrawal of an authorised recipient*

**OR**

Migration agent  **OR** Exempt person  ► Your migration agent/exempt person should complete form 956 *Advice by a migration agent/exempt person of providing immigration assistance*