

Application for Ghana Entry Permit/Visa REGULAR SERVICE Embassy of Ghana Washington DC.

| | | | | | | | 0 | | | | |
|---|----------------|-------------|-------|-------------------|---|--|-------------------|-------------|------------------|--|--|
| For Official Use Only | | | | | | | | | | | |
| Visa No.: | Attach recent | | | | | | | | | | |
| Type of Visa: | | | | | passport size | | | | | | |
| Date of Issue: | | | | | photo | gr | aph here | | | | |
| Issuing Officer: | | | | | | | | | | | |
| Charges: | | | | | | | | | | | |
| | | | | | | | | | | | |
| Single Entry \$60.00 | | | | | | FILL WITH BLACK INK ONLY 1. The form must be completed in block/ | | | | | |
| Multiple Entry | \$100.00 | | | | capital letters and submitted together with | | | | | | |
| NO PERSONAL | | KS | | | two(2) recent passport size photographs. | | | | | | |
| 1. Personal Informat | | | | | 2. Passport Information | | | | | | |
| a. Surname /Last Nam | | | | | a. Passport Number | | | | b. Date of Issue | | |
| | | | | | | 1 | | | | | |
| b. First Name(s) | d. Middle Name | | | c. Place of Issue | | | e. Date of Expiry | | | | |
| D : N ('C 1: 11) | | | | | | 3. Name and Address of Employer/School (USA) | | | | | |
| c. Previous Name (if a | аррисаот | e) | | | J. Ivallie | c an | IU AUUI ESS UI | Employer/Sc | chool (USA) | | |
| e. Date of Birth | f D1 | ace of Rin | ·h | | a. Profession/Occupation | | | | | | |
| e. Date of Birth f. Place of Birth | | | | | a. Floression/Occupation | | | | | | |
| g. Nationality h. Former Nationality (if any) | | | | | | NOTE: If retired or currently unemployed, please state the | | | | | |
| | | | | | address d | and | telephone nu | | | | |
| 4. Residential Address | | | | | employe | | | | | | |
| a. Street/ Mailing Address: | | | | | | b. Street/Mailing Address: | | | | | |
| 1 ~' | | ~ | | ~ 1 | | | | | | | |
| b. City: | C. | State d | . Zır | Code: | | | | 1 0 | 7' 0 1 | | |
| | | | | | c. Cit | У | | d. State: | e. Zip Code: | | |
| e. Home Phone No.: | | | | | C T 1 | | 1 37 1 | | | | |
| f. Cell Phone No.: g. Emergency Contact Person: (Full Name) | | | | | | f. Telephone Number: | | | | | |
| g. Emergency Contact | t Person: | (Full Nar | ne) | | V | Т. | :1 A 11 | | | | |
| h Cantaat Daganla Dh | nana Na | : D. | 1.4: | | ı Your | Eľ | nail Addres | SS: | | | |
| h. Contact Person's Ph | ione ivo. | 1. Ke | iauc | onship | | | | | | | |
| Applicant's intended of | late of tr | avel | | 1 | | n p | ossesion of | roundtrip | | | |
| | | | | ticket | | | | | | | |
| Amount of money Ap | plicant i | s travellin | g | If (yes | s) Indica | ate | ticket num | ber: | | | |
| with | | | | | | | | | | | |
| Traveling by: | Air | | | Sea | | | Land | | | | |



Application for Ghana Entry Permit/Visa

Embassy of Ghana Washington DC

| Pı | ırpose | of Jou | ırney | 7 : | | | | | | | | | |
|--|---|---------------------|--------|-----------------------|-------------|----------------------------|--|-----------------|------------|-----------|--------------|-------|--|
| | Busin | ess | П | ourism | Employ | ment | Offic | cial | Transi | t | Student | Other | |
| 5. | Name | , Add | ress | and Tele _l | phone Numbe | er of Lod | <u> </u> | | | | | | |
| a. Name of Hotel/Guest House in Ghana | | | | | | f. C | f. Contact Person in Ghana, Name and Address | | | | | | |
| b. Street (Mailing address) | | | | | g. \$ | g. Street(Mailing address) | | | | | | | |
| (| c. City/ | City/Town d. Region | | | | h. (| h. City/Town | | | i. Region | | | |
| e. Telephone Number | | | | | | | j. T | j. Tel. Number: | | | | | |
| 6. If you select employment, indicate name and add | | | | | | | | 1 - | | | | | |
| a. Name of Employer | | | | | | | | | | | | | |
| | o. Addı | | | | | | | | | | | | |
| - | e. City/ | Town | | (| l. Region | | e. Telephone Number | | | | | | |
| 7. | Durat | ion of | stay | in Ghana | 1 | | | 8. | Date of la | ast vi | isit to Ghar | na | |
| | | | • | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | 9. For Tourism, list at least two(2) areas of interest, or indicate in writing purpose of journey if you selected Other | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| Applicant's Signature: | | | | | | Date | of A | pplication | n: | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| For mailing: Use Address Below: | | | | | | | | | | | | | |
| | Visa Pı | | _ | | | | | | | | | | |
| | Embas: 2512 14 | • | | a l Drive N | W | | | | | | | | |
| Ι - | 8512 II Washir | | | | ** | | | | | | | | |
| | TUBILL | ·S. · · · · | J U. 2 | | | | | | | | | | |