



PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM.

1. PREFIX		2. LAST NAME		3. FIRST NAME		4. MIDDLE NAME	
5. HOME/MAILING ADDRESS							
6. CITY/TOWN			7. STATE/REGION		8. ZIP/POSTAL CODE		9. COUNTRY
10. DAYTIME TEL.		11. EVENING TEL.		12. FAX		13. E-MAIL ADDRESS	
14. DATE OF BIRTH (mm-dd-yy)		15. CITY OR TOWN OF BIRTH		16. COUNTRY OF BIRTH		17. NATIONALITY	18. SEX <input type="checkbox"/> MALE <input type="checkbox"/>
19. PRESENT OCCUPATION <input type="checkbox"/> MEDICAL DOCTOR <input type="checkbox"/> ENGINEER <input type="checkbox"/> EDUCATOR <input type="checkbox"/> ECONOMIST <input type="checkbox"/> LAWYER <input type="checkbox"/> BUSINESS <input type="checkbox"/> OTHER						20. SPECIFIC FIELD OF	

Visa Information

21. PURPOSE OF VISIT <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> TRANSIT <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL <input type="checkbox"/> OTHER _____			22. TYPE OF ENTRY <input type="checkbox"/> SINGLE <input type="checkbox"/>		
23. DOCUMENT TYPE <input type="checkbox"/> PASSPORT <input type="checkbox"/> TRAVEL DOCUMENT			24. DOCUMENT NUMBER		
25. DATE OF ISSUE		26. COUNTRY OF ISSUE		27. CITY OF ISSUE	
28. DATE OF EXPIRATION		29. ESTIMATED LENGTH OF STAY (NUMBER OF DAYS)		30. EXPECTED DATE OF ARRIVAL	
31. HAVE YOU EVER BEEN TO ETHIOPIA BEFORE <input type="checkbox"/> YES <input type="checkbox"/> NO		32. HOW LONG DID YOU STAY IN ETHIOPIA? FROM: _____ To: _____		DO NOT WRITE IN THIS SPACE FOR OFFICIAL USE ONLY	
33. WHAT WAS THE PURPOSE OF THE VISIT <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> TRANSIT <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL <input type="checkbox"/> OTHER _____			VISA NUMBER		
			ISSUE DATE		

Employer or School Information

34A. EMPLOYER OR SCHOOL NAME		34B. EMPLOYER OR SCHOOL TEL.	
34C. EMPLOYER OR SCHOOL ADDRESS			
GRATIS <input type="checkbox"/> YES <input type="checkbox"/> NO		FEE PAID	
RECEIPT NO			

To Be completed by Foreign Nationals of Ethiopian Origin

35. YOUR NAME		36. FATHER'S NAME		37. GRANDFATHER'S NAME	
38A. FATHER'S FULL NAME			39A. MOTHER'S FULL NAME		
38B. COUNTRY OF BIRTH	38C. CITY OF BIRTH	39B. COUNTRY OF BIRTH	39C. CITY OF BIRTH	PHOTO Attach one photograph Write your name on the back of the photograph	
38D. FATHER NATIONALITY		39D. MOTHER NATIONALITY			
38E. CURRENT ADDRESS		39E. CURRENT ADDRESS			

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT'S SIGNATURE: _____ DATE: _____

If this application has been prepared by a travel agency or another person on your behalf, the agent should indicate name and address of agency or person with appropriate signature of individual preparing this form.

SIGNATURE OF PERSON PREPARING FORM: _____ DATE: _____