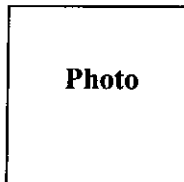




Visa Application Form



| | | |
|---|---|--|
| 1. First Name(s) : | | Cadre réservé aux services de l'Ambassade ou du Consulat Date d'introduction de la demande :/../.... Responsable du dossier : Visa : <input type="checkbox"/> Refusé <input type="checkbox"/> Accordé <input type="checkbox"/> Annulé Type et catégorie du visa : / Nombre d'entrées : <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiples Valable du :/../.... |
| 2. Family Name(s) : | | |
| 3. Date of Birth :/...../..... | 4. Identity Card Number : (For minors write mention « minors ») | |
| 5. Place and Country of birth..... | | |
| 6. Current Nationality : | 7. Original Nationality (Nationality of birth) : | |
| 8. Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female | 9. Marital situation : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Other: | |
| 10. Father's name and Family Name | 11. Mother's Name and Family Name : | |
| 12. Type of Passport : <input type="checkbox"/> Ordinary Passport <input type="checkbox"/> Diplomatical Passport <input type="checkbox"/> Service Passport or equivalent <input type="checkbox"/> Travel document for refugier or apatried <input type="checkbox"/> Other | | |

| 13. Passport Number : Serial Number : | | 14. Issued by : t : | Au :/..../.... Motif : (En cas de Refus ou d'Annulation) | | | | | | | | | | | | | | | |
|--|--|---|--|---------------|-----------------------|-----------------|----|--|--|--|----|--|--|--|----|--|--|--|
| 15. Date of issue/..../.... | | 16. Valid until :/..../.... | | | | | | | | | | | | | | | | |
| 17. Profession : | | | | | | | | | | | | | | | | | | |
| 18. Purpose of Travel : <input type="checkbox"/> Tourism <input type="checkbox"/> Affairs <input type="checkbox"/> Family visit <input type="checkbox"/> Culture/ Sport <input type="checkbox"/> Official visit <input type="checkbox"/> Medical Purpose <input type="checkbox"/> Studies <input type="checkbox"/> Other (Precise): | | | | | | | | | | | | | | | | | | |
| 19. Type of visa <input type="checkbox"/> Long validity <input type="checkbox"/> Short validity <input type="checkbox"/> Transit | 20. Number of entries : <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries | 21. Duration of stay : Number of days : | | | | | | | | | | | | | | | | |
| 22. Arrival date :/..../.... | 23. Border of entry or transit route | 24. Mean of transport : | | | | | | | | | | | | | | | | |
| 25. Previous visas : <table border="0"> <thead> <tr> <th><u>Date</u></th> <th><u>Number</u></th> <th><u>Place of issue</u></th> <th><u>Duration</u></th> </tr> </thead> <tbody> <tr> <td>1.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | <u>Date</u> | <u>Number</u> | <u>Place of issue</u> | <u>Duration</u> | 1. | | | | 2. | | | | 3. | | | |
| <u>Date</u> | <u>Number</u> | <u>Place of issue</u> | <u>Duration</u> | | | | | | | | | | | | | | | |
| 1. | | | | | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | | | | |
| 26. In case of transit, have you an entry permit to entry to Final country <input type="checkbox"/> No <input type="checkbox"/> Yes Country of destination : Valid until :/..../.... Delivered by | | | | | | | | | | | | | | | | | | |

27. Host or Host company :

(If not, indicate name or a temporary adress in Morocco)

Name :

Adress :

Telephone Number: Fax :

Email :

28. Who is paying for your travel and your needs during your stay ?

My Self Host(s) Host company (Indicate the names and the modalities and present corresponding documentation)

.....

29. Financial Means used during your stay :

Moyens de financement utilisés au cours du séjour :

Money (Cash) Traveller Cheques Credit Card Accomodation

Others :

Travel Insurance and/or Medical Insurance – Valid until : . . / . . /

30. Children (individual application for each passport)

Family Name First Name Date of birth

1-

2-

3-

I declare that all information I advanced is correct and complete. I am conscious of the fact that any false declaration will lead to the rejection of application or the annulment of the the visa if already issued and may lead to legal proceedings according to the regulations in force in Morocco.

Note :

- In addition to your valid passport and visa, you should be able during your passage through the Moroccan frontier to present all documents that may justify your return and your stay, your subsistence means, insurance statement, etc

- Entry to the Moroccan territory may be refused to the alien who does not fulfil all these requirements.

Providing all the required documents does not necessarily open right to visa.

31. Applicant's adress :

.....

32. Phone :

.....

33. Done in :

34. Firm :