



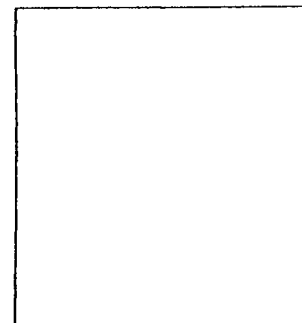
REPÚBLICA DE ANGOLA

SECTOR CONSULAR DA EMBAIXADA DE ANGOLA
EM WASHINGTON, D.C, ESTADOS UNIDOS DA AMÉRICA
2100 16TH STREET N.W., WASHINGTON, D.C. 20009
PEDIDO DE VISTO DE ENTRADA
VISA REQUIREMENT FORM

(1 of 2 pages)

- Please complete the form in black ink
Tick the boxes T which apply and attach
A letter of invitation or correspondence sent by the individual or institution to be contacted in Angola.
Your current passport and
Two recent passport-sized photographs

TRANSIT ORDINARY WORK PERMIT RESIDENT PERMIT
TRÁNSITO ORDINÁRIO TRABALHO FIXAÇÃO DE RESIDÊNCIA



PERSONAL DATA

1. Name Surname Sex: M | F | U
4. Date of birth Nationality Nationality of origin
7. Place of birth Country of birth Other nationalities
10. Father's name Mother's name
11. Marital status: Single Married Separated Divorced Widowed
12. Mailing address Tel:
13. Trade or profession Employer:
14. Office/Employer's address Tel:
15. Individual traveling with you:
16. Person, company or Institution to be contacted in Angola:
17. Name of persons who can provide information: (Name or references, address and nationality phone / fax #)
Intended stay in Angola

PASSPORT INFORMATION

19. Ordinary passport Diplomatic/ Official passport Other document # of Passport
20. Name of issuing authority Issue date Valid until

**TO BE ANSWERED BY TRANSIT APPLICANTS ONLY**

21. Do you have a visa Yes  No , Residence permit Yes  No , Permit of staying Yes  No , to enter to the final country.  
 Tem visto Sim Não Autorização de residência Autorização de permanência para entrar no país de destino
22. Country of destination \_\_\_\_\_ 23. Date of departure from Angola (dd/mm/yy): \_\_\_\_\_  
 País de destino Data da saída de Angola
24. Itinerary \_\_\_\_\_ 25. Time of permanence \_\_\_\_\_  
 Itinerário Tempo de permanência

**TO BE ANSWERED BY WORK APPLICANTS ONLY.**

26. Contract organ: \_\_\_\_\_ 27. Position you will occupy: \_\_\_\_\_  
 Organismo a contactar Posição a ocupar
28. Address: \_\_\_\_\_  
 Endereço
29. Date of initiation of contract: \_\_\_\_\_ 30. Caution date on: \_\_\_\_\_ 31. Amount of caution: \_\_\_\_\_ Payable to SME  
 Data do início do contrato Data da caução Valor da caução A pagar ao SME

**TO BE ANSWERED BY RESIDENT PERMIT APPLICANTS ONLY.**

32. Reason to seek residence: \_\_\_\_\_  
 Razão pela qual quer residir em Angola
33. Have you lived in Angola before? Yes  No  Place where you lived in Angola \_\_\_\_\_  
 Já viveu em Angola? Sim Não Lugar aonde residiu em Angola
34. Address \_\_\_\_\_  
 Endereço
35. Will you reside with your family?: Yes  No  Wife  Husband  Father  Mother  Number of children  \_\_\_\_\_  
 Vai residir com a sua família? Sim Não Esposa Marido Pai Mãe Número de filhos
36. Do you want to live temporarily  or definitively ? Means of subsistence \_\_\_\_\_  
 Vai viver temporariamente ou definitivamente Meios de subsistência

REMARKS: The Consular Section of the Embassy of Angola has full authority to evaluate and request more documents than those submitted by applicant. The latter is hereby informed that submitting the aforementioned documents does not guarantee automatic approval for issuance of the visa. It is advisable to apply for the visa at least two weeks prior to your prospective departure date.

I declare that the information given in this application is correct to the best of my knowledge and belief.  
 The person that will travel to Angola on transit or ordinary visas are not allowed to work or perform any payable activity.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Obs/Comment: \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

Pagou:..... Cheque Nr..... Nr. do Visto ..... Data:..... Parecer dos Serviços Consulares _____ _____ O Encarregado para os Assuntos Consulares _____	Despacho da Direcção de Emigração e Fronteiras de Angola Mediante TELEX, FAX n.º _____ _____ Anexado ao processo _____, de ____/____/____ O Director Nacional _____
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