



**III PASSPORT INFORMATION**

Passport/Travel Document Number :

Place of Issue :

Date of Issue :  -  -  (DD-MM-YYYY)

Date of Expiry/Valid Until :  -  -  (DD-MM-YYYY)

Type of Passport :  Personal  Family

*Please complete this section if your spouse and/or dependants included on your passport/travel document are travelling with you :*

No.	Relation(s)	Sex	Date of Birth (DD-MM-YYYY)	Name
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>

*Please use this code :* Relation(s) : 1:Husband 2:Wife 3:Child  
Sex : F:Female M:Male

**IV SPONSOR IN INDONESIA (IF ANY)**

Type of Sponsor :  Individual  Government  International Institution  
 Company  NGO  Others

Name of Person/Institution :

Address :

City :

Province/State :

Phone Number :  -  -

**V OTHER INFORMATION**

Have you ever been to Indonesia before? :  Yes  No

Are you in possession of any other countries' travel documents? :  Yes  No

Do you have previous visa to enter Indonesia? :  Yes  No

Has your visa application been refused before? :  Yes  No

Have you ever been deported from Indonesia? :  Yes  No

Have you ever committed a crime or any offense? :  Yes  No

Return/Through Ticket/Airline Company :

Place of Issue :

Date of Issue :  -  -  (DD-MM-YYYY)

Date of Expiry/Valid Until :  -  -  (DD-MM-YYYY)

**I hereby declare that the statements given above are true and I understand that even if granted a visa, the admission at the airport remains the discretion of the immigration authorities in Indonesia**

Applicant's Signature

Washington, D.C.,  -  -  (DD-MM-YYYY)

**Important Note :**

- \* To be completed in duplicate with two passport size photographs attached
- \* Applicant's original signature is required
- \* Passport must be valid for at least six months