

# BELIZE

## VISA APPLICATION FORM



MISSION/STATION: \_\_\_\_\_

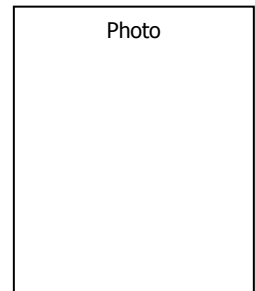
VISA NUMBER: \_\_\_\_\_

DTD: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

<b>1. APPLICANT INFORMATION</b>							
1.1 Last Name			1.2 Given Names				
1.3 Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		1.4 Date of Birth <i>(day/month/year)</i>	/	/		
1.5 Country of Birth			1.6 Nationality				
1.7 Do you hold or have ever held other nationalities (Please state)							
1.8 Passport Number			1.9 Place of Issue				
1.10 Issuing Authority			1.11 Date of Issue <i>(day/month/year)</i>	/	/		
1.12 Date of Expiry <i>(day/month/year)</i>	/	/					
1.13 Are you the holder of another country passport. <i>Give Details.</i>							
1.14 Your full residential address							
1.15 Contact Details		Tel: (   )		Email:			
1.16 Will any children be travelling with you? If yes provide full details about the child/children						<input type="checkbox"/> YES <input type="checkbox"/> NO	
1.17 Full Name	Date of Birth		Country of Birth	Nationality	Passport Number	Relationship	
	/   /						
	/   /						
	/   /						
<b>2. YOUR TRIP</b>							
2.1 On which date do you wish to travel to Belize? <i>(day/month/year)</i>			/   /	2.2 On which date will you leave Belize? <i>(day/month/year)</i>		/   /	
2.3 What type of visa are you applying for?			<input type="checkbox"/> SINGLE <input type="checkbox"/> MULTIPLE				
2.4 What is the purpose of your visit to Belize?			<input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> OFFICIAL <input type="checkbox"/> STUDENT <input type="checkbox"/> OTHER				
2.5 Please give full address and telephone number of all the places where you will be staying during your visit in Belize.							
<b>3. PRESENT OCCUPATION</b>							
3.1 Employment Status		<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Part-Time <input type="checkbox"/> Retired <input type="checkbox"/> Student					
3.2 Have you ever worked for any of the organizations listed below? If yes give details.				<input type="checkbox"/> Armed Forces <i>(including national service)</i>			
				<input type="checkbox"/> Security <i>(including police and private security)</i>			

**4. TRAVEL HISTORY**

4.1 Have you travelled to Belize in the last 10 years? If yes provide details	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.2 Have you ever been refused or cancelled a visa for any country including Belize? Please give dates and details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.3 Have you been refused entry on arrival to Belize in the last 10 years?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.4 Have you ever been deported, removed or otherwise required to leave any country, including Belize in the last 10 years?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.5 Have you been charged or tried with any criminal convictions in any country including Belize?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.6 Have you ever been charged in any country with a criminal offence for which you have not yet been tried in court? Give Details.	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.7 In times of either peace or war have you ever been involved in or suspected of involvement in war crimes, crimes against humanity or genocide?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.8 Have you ever been involved, supported or encouraged terrorist activities in any country?	<input type="checkbox"/> YES <input type="checkbox"/> NO



\_\_\_\_\_  
SIGNATURE OF APPLICANT/GUARDIAN

\_\_\_\_\_  
DATE

**FOR OFFICIAL USE ONLY**

OUR REFERENCE: \_\_\_\_\_

**Supporting Documents** *(kindly list all supporting documents accompanying application)*


**RECOMMENDATIONS**


\_\_\_\_\_  
DIRECTOR  
IMMIGRATION AND NATIONALITY DEPARTMENT

\_\_\_\_\_  
DATE