



**KINGDOM OF CAMBODIA**  
**Nation Religion King**  
**VISA APPLICATION FORM**

One photo  
of applicant  
and of each  
child

Please fill the form with 1 photos and the original passport

Surname: .....		Present occupation: .....				
First name: ..... Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>		Place of residence: .....				
Date of birth: Day ..... Month ..... Year .....		.....				
Place of birth: .....		Fax/Phone: .....				
Birth nationality: .....		Workplace: .....				
Present nationality: .....		.....				
Passport or traveling document is valid for (country): .....		Purpose of visit <input type="checkbox"/> Diplomatic				
Date of entry to Cambodia: Day ..... Month ..... Year .....		<input type="checkbox"/> Tourist <input type="checkbox"/> Official				
Date of departure (length of stay) .....		<input type="checkbox"/> Business <input type="checkbox"/> Others ( Please Specify )				
Point of entry: .....		Point of exit: .....				
Means of Transportation: .....		Means of Transportation: .....				
Address during the visit: .....		Organization, Persons to be visited : .....				
Passport No: .....		First trip to Cambodia: <input type="checkbox"/> Yes				
Place of issue: .....		<input type="checkbox"/> No				
Date of issue: .....		Travelling on group tour: <input type="checkbox"/> Yes				
Date of expiration: .....		<input type="checkbox"/> No				
Children under 12 years travelling with you	Surname	First name Patronymic	Sex		Date of birth	Permanent Address
			M	F		
Relatives in the Kingdom of Cambodia						

<b>Applicant's Signature:</b>	<b>Date:</b>
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(1) If any application form does not conform to the Embassy's instruction, it will be refused and returned to its destination.  
(2) It is imperative to provide the Embassy the applicant's telephone number for any further inquiries that may be required.

<b>OFFICIAL USE ONLY</b>	<b>RECEIVER</b>
Visa No:	Name:
Date:	Signature:
	Date: