VISA APPLICATION FORM

SIERRA LEONE HIGH COMMISSION LONDON

CONSULAR SECTION

41 Eagle Street
Holborn
LONDON WC1R 4TL
TEL.: 0207 404 0140 FAX. 0207 430 9862
Email: consular@slhc-uk.org.uk

ATTACH PHOTO HERE

FAMILY NAME: .....

OTHER NAMES: .....

SEX: MALE ☐ FEMALE ☐

MARITIAL STATUS: MARRIED ☐ SINGLE ☐ DIVORCED ☐ ANY OTHER .....

PRESENT ADDRESS: .....

.....

.....TEL NO.: .....

DATE OF BIRTH: ..... PLACE OF BIRTH: .....

NATIONALITY: ..... OCCUPATION/ INSTITUTION: .....

NAME AND ADDRESS OF EMPLOYER: .....

.....

.....

PASSPORT NUMBER: ..... DATE OF ISSUE: .....

PLACE OF ISSUE: ..... DATE OF EXPIRY: .....

TYPE OF VISA : SINGLE ☐ SIX MONTH MULTIPLE ☐ ONE YEAR MULTIPLE ☐

PURPOSE OF VISIT: .....

.....

PROPOSED DATE OF ARRIVAL IN SIERRA LEONE.....

DURATION OF STAY: .....

NAME OF REFERENCE IN SIERRA LEONE: .....

PROPOSED ADDRESS IN SIERRA LEONE: .....

.....

BANK REFERENCE / NAME OF PERSONAL BANKER (or if none proof of sufficient means of maintenance):

.....

.....

SIGNATURE OF APPLICANT: ..... DATE: .....

NOTE:

1. One application form to be completed 2. One passport-sized photograph should be attached
3. Tick all boxes

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REFERENCE NUMBER OR APPROVAL FROM IMMIGRATION HEADQUARTERS, FREETOWN WORK PERMIT NUMBER (IF NECESSARY): .....

VISA NUMBER/ENTRY PERMIT NO.: ..... VALID UP TO: .....

FEE PAID (IF NECESSARY): ..... GENERAL RECEIPT NO.: .....

DATE: ..... SIGNATURE: .....

COMMENT:.....