

**For office use only**

Visa No.

ERV No.



ONE PASSPORT  
PHOTO  
5cm X 5cm  
2" X 2"  
Do not paste or staple

**THE HIGH COMMISSION OF THE UNITED REPUBLIC OF TANZANIA**  
50 RANGE ROAD., OTTAWA, ONTARIO, K1N 8J4, TEL: 613 232 1509; FAX: 613 232 5184  
E-MAIL: [contact@tzrepottawa.ca](mailto:contact@tzrepottawa.ca); WEB: [www.tzrepottawa.ca](http://www.tzrepottawa.ca)  
**VISA APPLICATION FORM**  
(Visa regulations and requirements on next page)

1. Surname/Family Name;.....Gender (M/F):.....
2. Given names:.....Marital Status: .....  
(PLEASE PRINT ALL NAMES CLEARLY, NO INITIALS)
3. Place of birth (City, Country)..... Date of birth (DD/MM/YY).....
4. Nationality at birth: ..... Present nationality:.....
5. Current address: ..... City: .....
6. Province:..... Postal Code: ..... Country:.....
7. Tel: Home: .....Office:..... E-mail: .....
8. Occupation: .....
9. Passport number: ..... Place of issue (City):.....
10. Date of issue (DD/MM/YY):..... Expiry date (DD/MM/YY):.....
11. Purpose of visit:

<input type="checkbox"/>	Tourism, Leisure, Holiday,	<input type="checkbox"/>	Other business: work, volunteer work , research, filming.	<input type="checkbox"/>	Various
<input type="checkbox"/>	Visiting friends, relatives	<input type="checkbox"/>	Study, Internship	<input type="checkbox"/>	Diplomatic
<input type="checkbox"/>	Mission	<input type="checkbox"/>	Transit	<input type="checkbox"/>	Official
<input type="checkbox"/>	Business, Meeting, Conference	<input type="checkbox"/>	Health Treatment	<input type="checkbox"/>	Same day visitor

If other than Tourism or Visiting, please provide further details:.....

12. Address in Tanzania, including reference: .....
13. Requested number of entries:   Single            Double            Multiple
14. Date leaving Canada: ..... Date entering Tanzania: .....  
If Double or Multiple entry, indicate last date of entry into Tanzania: .....
15. Duration of (each) stay: ..... Date of departure .....
16. Declaration: I hereby declare that the information stated above is true and correct:  
Signature of applicant: ..... Date: .....

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