EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR, WASHINGTON D.C. APPLICATION FOR ENTRY VISA (\square Diplomat/ \square Official/ \square Laissez-Passer)

1.	. Name in Full : /		/	
	(Fill in Block Letters) (First Name)	(Middle Name)		Name)
2.	. Father's Full Name /_		1	7
	(Fill in Block Letters) (First Name)			РНОТО
3.	Date of Birth (dd/mm/yy):/			111010
			/	Recently taken 35 mm X 45
5.				mm color photo
6.				With full face, front view,
				no hat and against a plain
8.	Spouse's Full Name :			light background
	Passport			
9.	(a) Number (b) Date of		//	
	(c) Place of Issue : (d) Issuing			
	☐ United States,			
	□ Other :			
	(e) Date of Expiration (dd/mm/yy):/_			
10.). Present Address in U.S			
	(Include apartment number, street, city, state or pro-			
	Contact Phn. No. (Res.) ()			
12.	2. Address in Myanmar			
	Have you ever been to Myanmar: ☐ Yes ☐ No Have you ever been refused to enter Myanmar Why:	: ☐ Yes ☐ No (If Yes) When: (dd/mm/yy):	/
15.	. Purpose of Entry to Myanmar:			
	Expected dt. Of Arrival (dd/mm/yy): (ETA-M Expected dt. Of Departure (dd/mm/yy): (ETD-M	lyn.):/	/Flight	t No. () t No. ()
16.	6. Name and address of guarantor in Myanmar			
17.	. Attention for Applicant :			
	(a) Apart from the professions mentioned in this visa appli(b) Applicants shall abide by the Law of the Republic of the			the control of the co
	Union of Myanmar.			
	(c) Legal action will be taken against those who violate or the Union of Myanmar.	contravene any provision o	of the existing laws, rules and	regulations of the Republic of
	I hereby declare that I fully understand the above mentioned		ulars given above are true and	correct and that I will not
enga	gage in any activities irrelevant to the purpose of entry stated h	erein.		
		Date (dd/m	m/yy): /	(Signature of Applicant)
	(50	D OFFICIAL LISE ONLY)		
Visa		R OFFICIAL USE OINLY)		
Visa	a Authority: MOFA Lt. No. 46 11 11 (66) Dated: 26 Januar other):: MOFA Lt. No,	1 × × × × × × × × × × × × × × × × × × ×		
			Signature	e of Officer in-Charge
		Embassy of the Ren	oublic of the Union of Myanm	
Cont	ntact : Tel (202) 332 4352 (202) 238 9332 Fax (202) 332 4351			

Updated: August 2012

GOVERNMENT OF THE UNION OF MYANMAR IMMIGRATION DEPARTMENT

REPORT OF ARRIVAL

(This is to be delivered to the immigration authorities upon arrival in Myanmar.)

Name in Full (Fill in block letters)	
- Surname (As in Passport)	PHOTO
- First Name & Middle Name	Recently taken
Citizen:□ US / □ If others	2" X 2" or 50 mm X 50 mm
Passport No.:	color photo
- Place of Issue: United States,	with full face, front view, no hat and against
□ (If Others):	a plain light background
- Date of Issue: Date (dd/mm/yyyy): / /	
Expected Date of Arrival into Myanmar Date (dd/mm/yyyy):/ / /	
- (Flight No)	
Date of expiration of stay in Myanmar Date (dd/mm/yyyy):/ /	
Address in Myanmar:	
Address in Frydrinar.	
Name and Address of Guarantor in Myanmar:	
 Signatu	re of Passport Holder
(OFFICIAL USE ONLY)	
Visa No Date of Issue	
Visa Authority: MOFA Lt. No. 46 11 11 (110) , Dated : 6 April 1994,	
ν	
(If other) MOFA Lt.No, Dated:	

Immigration Officer

Embassy of the Republic of the Union of Myanmar Washington D.C.

Work History for Visa Applicant

1.	Name in Full:	/	
	(Full in block letter) (First Name)	(Middle Name)	(Last Name)
2.	Date of birth (dd/mm/yy):/	_/	
3.	Place of Birth : □ U.S.	🗆 (other):	
	Permanent Home Address :		
5.	Tel. (Res.) ()		
	Email:		
Э.	Work Discription (Current)		
	(a) Job Title ://	To (dd/mm/yy) : /	/
	(b) Office		
	Section		
	Division		
	Describe your Duties		
	-		
7.	Work Description (Previous)		
	(b) Job Title ://	- To (dd/mm/vv) : /	
	(b) Office		
	Section		
	Division		
	Describe your Duties		
	Describe your Duties		
irr	I hereby declare that the particulars given a elevant to the purpose of my entry.	bove are true and correct and that I will	not engage in any activities
			Signature of Applicant
		Date: (dd/mm/)	

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