



KINGDOM OF CAMBODIA
Nation Religion King

VISA APPLICATION FORM

Photograph
4 x 6

**ROYAL EMBASSY OF CAMBODIA
IN BRUSSELS**

Please fill it in duplicate with 2 photos
and 1 copy of 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 : Present nationality :		Workplace :				
Passport or traveling document is valid for (country) all countries		Purpose of visit <input type="checkbox"/> Diplomatic <input type="checkbox"/> Tourist <input type="checkbox"/> Official <input type="checkbox"/> Business <input type="checkbox"/> Others (Please Specify)				
Date of entry to Cambodia Day..... Month..... Year						
Date of departure (length of stay)						
Point of entry : Means of Transportation :		Point of exit : Means of Transportation :				
Address during the visit :		Organization, Persons to be visited :				
Passport No : Place of issue : Date of issue : Date of Expiration :		First trip to Cambodia <input type="checkbox"/> Yes <input type="checkbox"/> No				
		Traveling on group tour <input type="checkbox"/> Yes <input type="checkbox"/> No				
Children under 12 years traveling with You	Surname	First name Patronymic	Sex M F		Date of birth	Permanent Address
Relatives in the Kingdom of Cambodia						

For official use

ថ្ងៃផ្តល់.....

ទីដាក់កាតព្វកិច្ច.....

ប្រភេទ.....

ថ្ងៃ.....ខែ.....ឆ្នាំ.....

ហត្ថលេខាប្រតិបត្តិការបណ្តុះបណ្តាលការក្នុងស្រុក

I hereby declare that the information
on this form is true and correct
Place. (Date).....
(Signature of the applicant)