



APPLICATION FOR VISA

Royal Thai Embassy, Dhaka

Please Indicate Type of Visa Requested

- Diplomatic Visa
- Official Visa
- Courtesy Visa
- Non-Immigration Visa
- Tourist Visa
- Transit Visa

Number of Entries Requested _____

Please attach
2 photographs
taken within
the last 6 months
(3.5 x 4.5 cm)

Mr. Mrs. Miss _____

First Name Middle Name Family Name (in Block letters)

Former Name (if any) _____

Countries for which travel document is valid _____

Nationality _____

Nationality at Birth _____

Proposed Address in Thailand _____

Birth Place _____ Marital Status _____

Date of Birth _____

Name and Address of Local Guarantor _____

Type of Travel Document _____

No. _____ Issued at _____

Date of Issue _____ Expiry Date _____

Tel./Fax. _____

Occupation (specify present position and name of employer)

Name and Address of Guarantor in Thailand _____

Current Address _____

Tel./Fax. _____

Tel. _____ E-mail _____

I hereby declare that I will not request any refund from my paid visa fee even if my application has been declined.

Permanent Address (if different from above) _____

Signature _____ Date _____

_____ Tel. _____

Names, Dates and Places of Birth of minor children

(if accompanying) _____

Attention for Tourist and Transit Visas Applicants
I hereby declare that the purpose of my visit to Thailand is for pleasure or transit only and that in no case shall I engage myself in any profession or occupation while in the country.
Signature _____ **Date** _____

Date of Arrival in Thailand _____

Traveling by _____

Flight No. or Vessel Name _____

Duration of Proposed Stay _____

Date of Previous Visit to Thailand _____

Purpose of Visit: Tourism Transit Business

Diplomatic /Official Other (please specify) _____

FOR OFFICIAL USE

Application/Reference No. _____

Visa No. _____

Type of Visa:

- Diplomatic Visa Official Visa Courtesy Visa
- Non-Immigration Visa Tourist Visa Transit Visa

Category of Visa: _____

Number of Entries:

- Single Double Multiple ___ Entries

Date of Issue _____ Fee _____

Expiry Date _____

Documents Submitted _____

Authorized Signature and Seal _____

FOR OFFICIAL USE ONLY

UG PP AF RD Multiple Other _____

GPV CAF STH SES FIT GPT GFL NRR Other _____

FVP IAF FP NF OT ECBS ECWC ECFL CI RR FPT SN

HT WP Other _____

P F SR RC MFA WP3 PPP PAF TRC ITV date

A R VL WL BL

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