

ZAMBIA IMMIGRATION VISA FORM 22
REPUBLIC OF ZAMBIA

ZAMBIA HIGH COMMISSION,
2 Palace Gate, Kensington, London, W8 5NG
Tel: 0207589 6655 / Tel/ Fax: 02075 810546
Website: <http://www.zambiahc.org.uk>
E-mail: immzhcl@btconnect.com



VISA APPLICATION FORM

1. Surname:		2. First Name:		Middle Name:	
3. Date of Birth:		Place of Birth:		4. Nationality:	
				Sex:	
5. Profession:		Business Telephone No. ()		6. Nationality of Parents at time of Birth:	
7. Passport No.		8. Place of Issue:			
Date of Issue:		Date of Expiration:			
9. If accompanied by your spouse or children, give the following particulars: (Note: Every applicant fills out an individual form)					
Full Name (s)		Date & Place of Birth		Relationship	
10. Present Address:					
Telephone No.		()		Email:	
11. Permanent Address:					
Telephone No.		()		Email:	
12. (a) Type of Visa Requested: Tourist () Business () Church Business () Visitor () Diplomatic () Official () Student () Transit () Volunteer () Courtesy ()					
(b) Entry requested: Single () Double () Multiple ()					
(c) Date of entry into Zambia: _____ (d) Length of Stay in Zambia: _____					
13. Final Destination of Journey in Zambia:			Address in Zambia:		
14. Expected Departure Date from Zambia:			Next Destination from Zambia:		
15. Duration and Particulars of any previous residence or visits in Zambia:					
16. If traveling on business, please list names and addresses of persons to be visited in Zambia:					
17. If visiting relatives or friends, please list names and addresses of persons to be visited in Zambia:					
18. Signature of Applicant: _____ Date: _____					
For official use only:					
Visa fee	Receipt#	Visa #	Official stamp	Signature	