



Visa Application Form
Form 5A
(FILL OUT IN CAPITAL LETTERS ONLY)

Warning: giving false information is considered a crime in accordance with the Passport and Immigration Act, 2011. Visa fees are non-refundable. Visa is not transferable and attempt to do so is considered a crime.

Place of Application ..... Date: ...../...../20.....

Have you Previously Applied for South Sudan Visa. Yes [ ] No [ ]

If yes, Previous visa No: ..... Date of Issue.....Place of Issue.....

.....Date of Arrival in south Sudan.....Point of Entry.....

.....point of Exit.....

1. Visa Type Requested: Single: [ ] Multiple: [ ] Transit: [ ] Other: [ ] (Specify).....

Purpose of visit: Visit [ ] Education [ ] Tourism [ ] Medical treatment [ ] Official [ ] Other [ ] (Specify).....

Duration of Intended Stay.....Date of Intended Arrival in South Sudan.....

Mode of Transport: Air [ ] Road/Trail [ ] River [ ]

2. Personal Details (As in Passport)

Surname: .....

Given Names: .....

Date of Birth (Day/Month/Year): ...../...../.....

Place of Birth: .....Country of Birth.....

Sex: Male [ ] Female [ ]

Marital Status: Single [ ] Married [ ] Divorced [ ] Widowed [ ]

Nationality / Citizenship:

.....

(If dual, give both)

**3. Passport Details:**

4. Passport Type: Regular  Diplomatic  Special  Business  Other  (specify)

Passport No: ..... Date of Issue (Day/Month/Year): ...../...../.....

Country of Issue: ..... Date of Expiry (Day/Month/Year): ...../...../..... Place of Issue:

.....

**5. Professional / Occupation Details:**

Present Occupation: ..... Title: .....

Employer Name: .....

Employer Address:

.....

Phone No: .....

E-mail: .....

**6. Applicant's Contact Details:**

Present Address:

.....

.....

Permanent Country of Origin Address:

.....

.....

Phone No: ..... Mobile No: .....

E-mail Address: .....

**7. Family Details:**

**Spouse Details**

Surname: .....

Given Names: .....

Permanent Address:

.....

.....

Phone No: ..... Mobile No: .....

E-mail Address: .....

**Next of Kin Details**

Surname: .....

Given Names: .....

Permanent Address:

.....  
.....

Phone No: ..... Mobile No.....

E-mail Address: .....

**8. Have you ever:**

- a) Been convicted of a crime or offence in any country?      Yes       No
- b) Been deported or removed from South Sudan or any country for overstaying your visa or violating any law or regulation?      Yes       No
- c) Been convicted and sentenced for a drug offence in any country in violation of law concerning narcotics, marijuana, opium, stimulants or psychotropic substances?      Yes       No
- d) Committed trafficking in persons or incited or aided another to commit such an offence?      Yes       No
- e) Are you suffering from tuberculosis, any other infectious or contagious disease      Yes       No

If you answer yes to any of the questions above, provide explanation below:

.....  
.....

**Address of Place of Stay / Hotel:**

.....  
.....

Funds Available For My Stay .....

**9. Guarantor or references in South Sudan:**

Name: ..... Telephone No.: .....

Address.....

Date of Birth (Day/Month/Year) : ...../...../..... Sex: Male

Female

Relationship to Applicant:

Profession/occupation: .....

Nationality and Immigration Status: .....

**10. Declaration:**

I declare that the information provided in this form is true and accurate.

Signature of the applicant (Sign below here)

Date (Write below here)

.....

: ...../...../.....

**FOR OFFICIAL USE**

**Approving Authority:**

Officer Name: ..... Title: .....

Entry Type: Single  Multiple  Period of stay .....

Officer's Signature: ..... Date (Day/Month/Year): .....

Comments:

**Fees**

Amount: .....

Date of Receipt: ..... Receipt No: .....

Designated Officer's Name: ..... Title: .....

Signature and stamp .....

Visa Number: .....