



EMBASSY OF THE REPUBLIC OF KENYA
2249 R. ST. N. W.
WASHINGTON , DC 20008
Tel: (202) 387 6101 Fax: (202) 462-3829

APPLICATION FORM FOR A VISA

(TO BE COMPLETED IN BLOCK LETTERS)

SINGLE VISA \$25.00

MULTIPLE ENTRY VISA \$50.00

TRANSIT VISA \$10.00

1. a. Surname (Mr/Mrs/Miss) _____ b. Other Names _____
 c. Full Names of Father/Husband/Wife _____
 (Names of husband or wife in case of married persons or father, if unmarried)
2. a. Date of Birth _____ Country and Place of Birth _____ Sex _____
 b. Profession/Occupation _____
3. A. Country of Residence _____
 b. Nationality at Birth _____ c. Present Nationality, if different _____
4. Passport/Travel Document Held:
 a. No. _____ Place & Date of Issue _____
 b. Issued by _____ Valid Until _____
 (Name of Authority Issuing Passport/Travel Document)
5. Contact address and telephone number in the US _____

6. a. Reason for Entry _____
 b. Proposed Date of Entry _____ Duration of Stay _____
7. Full names and addresses of friends, firms or relatives to be visited, if any: _____

8. Dates and duration of previous visits to Kenya _____
9. Will you be returning to your Country of Residence/Domicile? _____
10. It should be noted that possession of a visas is not the final authority to enter Kenya.

I hereby declare that the foregoing particulars are correct in every detail.

Date _____ Signature of Applicant _____

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