

Republic of South Sudan

Ministry of Interior



Directorate of Nationality, Passports and Immigration

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
of IssueDate of Arrival in south SudanPoint of
Entrypoint 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
Mode of Transport: Air Road/Trail River River
2. Personal Details (As in Passport)
Surname:
Given Names:
Date of Birth (Day/Month/Year):/
Place of Birth:Country of Birth
Sex: Male
Marital Status: Single Married Divorced Widowed

Nationality / Citizensl	_				
(If dual, give b					
3. Passport Details	:				
4. Passport Type:	Regular	Diplomatic	Special	Business	Other (specify)
Passport No:		Date of Issue	e (Day/Month	n/Year):/	/
Country of Issue:		Date of Expi	ry (Day/Mon	th/Year):/	/Place of Issue:
		_			
5. Professional / Oc	cupation Det	ails:			
Present Occupation:			Title:		
Employer Name: Employer Address:					
E-mail:			. 1 110110 1 (0.		
6. Applicant's Cont	act Details:				
Present Address:					
	· C O: - i A . 1.1				
Permanent Country o	•				
Phone No:					
E-mail Address:					
7. Family Details:					
Spouse Details					
Surname:				-	
Given Names:					
Permanent Address:					

E-mail Address:
Next of Kin Details
Surname:
Given Names:
Permanent Address:
Phone No:
E-mail Address:
8. Have you ever:
a) Been convicted of a crime or offence in any country? Yes \(\Boxed{\square}\) No \(\Boxed{\square}\)
b) Been deported or removed from South Sudan or any country for overstaying your visa or violating any law or regulation? Yes \(\square \) No \(\square \)
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 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:

Address	
Date of Birth (Day/Month/Year):/	/
Relationship to Applicant:	
Profession/occupation:	
Nationality and Immigration Status:	
10. Declaration:	
I declare that the information provided in this form	m is true and accurate.
Signature of the applicant (Sign below here)	Date (Write below here)
	://
<u>FOR</u>	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:	