

http://gambiaembassy.us/ Tel. (202) 785 1399 Fax (202) 785 1430 E-mail info@gambiaembassy.us

APPLICATION FORM FOR VISA

1.	First Name	Middle Name	Last Name or Surname	
2.	Birthdate Month	Date	Year	
3.	Place of Birth			
4.	Marital Status	Single Married	□ Divorced	
5.	Purpose of Visit	Official Business	□ Tourism	
6.	Occupation/Profession/Activities	Occupation/Profession/Activities		
7.	Present Address			
8.	Mobile/Cell Phone Number	obile/Cell Phone Number E-Mail Address		
9.	Father's Name	Nationality		
10.	Mother's Name	Nationality		
11.	Passport No.	Issue Date Expi	ry Date	
12.	Nationality at Birth	Current Nationality		
13.	Entry Date	Entry Date Date/s of Previous Visit/s		
14.	Emergency Reference/s in the USA (Name, Address, Telephone No.)			
15.	Applicant's Signature	icant's Signature Date		
16.	 REQUIREMENTS FOR VISA (please note that we canNOT process unless the requirements submitted are complete) Valid passport (Please submit the actual passport; the visa will be affixed to it.) One passport-size photograph on white background (taken in the last six months; please write name and passport number on the back and sign) Completed and signed application form A nonrefundable application fee of \$100.00 in money order only, payable to the Embassy of The Gambia Prepaid self-addressed/return envelope (FedEx/UPS or Priority/Express Mail recommended) Personal or telephone interview may be required. Regular visa processing time 3 – 4 days. PICKUP/DROP-OFF HOURS Monday - Thursday – 11:00 AM to 2:00 PM (Lunch Break is 12:00nn-1:00pm) Friday – 11:00 AM			
	Express	Service available for an additional fee of	of \$50.00.	
FOR CONSULAR OFFICE USE ONLY				
Vica iccued ic multiple-entry				

Visa issued is multiple-entry.

Remarks

Mode of Dispatch

Money Order/Cashier's Check No. and Amount