

EMBASSY OF THE REPUBLIC OF INDONESIA PRAGUE

		VISA APPLICATION FORM																					_		
Date:	(D	D-MM-Y	YYYY	<i>(</i>)																		D	lhata	. anamb	
I. GENERAL																						Р	посс	ograph	
Length of Stay in Indonesia	:	Da	ıy(s)			M	onth	ı(s)				Yea	ırs(s)											
Type of Visa		Transit				Si	ngle	Visi	it																
		Multip	le Vi	sit		Li	mite	d Sta	ay											L					_
For Transit Purpose Country of Destination	:	$\overline{1}$											<u> </u>	1		1		Т	\top	\top	\top	T	1	1	
Port of Departure	: -		1									İ						T	T	Ī	T	Ī	T]	
Flight/Vessel Name	: -		1										i					T	T	Ť	Ť	Ť	T]	
For Visit Purpose	· <u>I</u>																						-		
Purpose of Visit	:	Tourism Convention Family Visit Sports																							
		Study				Arts]		Co	mme	rcia	l		(Othe	rs							
Country of Destination	:																	L	L	L	L	L	L]	
Place of Visit	:																	L	L	L	L	L	L]	
Flight/Vessel Name	:																			L	L	L]	
For Limited Stay Purpose Purpose of Limited Stay	:	Work			Join	t Fami	ily			Soc	ial			Othe	ers										
Address in Indonesia	:																			L	L	L]	
City	:																			L	\Box	Ι]	
Province	:																			L	\Box	Ι]	
Phone Number	:] -																						
Point of entry into Indonesia	. —	$\overline{}$	1		1	1							_			T	_	$\overline{}$	$\overline{}$	_	$\overline{}$	_	_	1	
Data of entry	: <u> </u>] 						(D	D-M	NΔ	VVX	/V)				1]	
Data of entry	•								(D	D-IVI.	IVI-	111	1)												
II. PERSONAL DATA																									
First Name	:																	$\underline{\mathbb{L}}$	\perp	L	\perp	L]	
Midle Name	:																	L		L		L]	
Family / Surname	:																	L	\perp	L	L		<u> </u>]	
Sex	:	Male			Fem	ale																			
Marital Status	:	Marrie	d		Sing	le																			
Place of Birth	:																		\perp]	
Date of Birth	:	□ -			- [(D	D-M	M-	YYY	YY)												
Nationality	:																		\perp	L	\mathbb{L}	L	\mathbb{L}]	
Address	:																		\perp		\perp	L	L]	
City	:																		\mathbf{L}	L]	
Province/State	:																			L	L]	
Phone Number	:] -			-																			
Occupation/Position	:	Profess	sional	1					Go	overn	me	nt						5	Sales	3					
		Student							Н	ousew	vife	e						(other	S					
Name of Company	:]	
Address	: 🗀															Ī		Ī	Ī	Ī	Ī	Ī	Ī		
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City	:		L		Ī						Ī	Ī	Ī			Ī	Ī	Ī	Ī	Ī	Ī	Ī	Ī		
Province/State	: 🗀	$\overline{\Box}$				Ì				İ	i		l	Ì		Ī	Ì	Ī	T	Ī	T	T	Ť	Ī	
Phone Number	. =		1			i					ī			1										•	

II. PASPORT INFORMATION	_			1		1			1		1	-	1	1	1	_										
Passport/Travel Document Number	:			1		1	1		1		<u> </u>		1	<u> </u>			_		_	_	_	-			1	
Place of Issue	:] 1	<u> </u>		1		ļ.,							<u> </u>			<u></u>		Ш			
Date of Issue	:		-] - 1				<u> </u>		DD-														
Date of Expire	:		-	<u> </u>		-	<u></u>] (DD-	MM	-Y	ΥY	Y)										
Type of Passport *	:	Pe	rson	al			Fa	amil	y																	
* Fill, if Type Passport Family:	an: 1																									
No. Relative(s): Sex: Date of	f Birth	h (DD)-MN -	M-YY	YY):	I	1	Na	me	: T		I	l	T	ı		1	Τ	Τ	Т	T				
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* (relative(s): 1=Husband, 2=Wife, 3=Child)						<u> </u>	ı	1			<u> </u>		<u> </u>	l		_							ш			
*(Sex : F=Female, M=Male)																										
IV. SPONSORSHIP IN INDONESIA																										
Type of Sponsor : Individual									Government International Institution																	
		Co	mpa	ıny				N	GO						(Othe	ers									
Name of Company	:																									
Address	:																									
City	: [L							_
Province/State	: [
Phone number	: [-] -																				
V. MISCELLANEOUS Have you ever been to Indonesia before?										1 v	es		_	l N	Ιο											
Are you in possession of any others countr	es' tra	ovel d	OCUI	nents	. ?			:		-	es			N												
Do you have previous visa to enter Indones		aver a	ocui	iiciic.						-	es				lo											
Have your visa application been denied bef										-	es			l N												
Have you ever been forced to leave Indone										-	es				lo											
Have you ever been committed a crime or a		fence	9					:		-	es			N												
		rence	•			1					CS] ''	1											
Return/Through Ticket/Airline Company:							<u> </u>									<u> </u>			Ļ	Ļ	<u>L</u>	<u> </u>				
	:										<u> </u>								<u> </u>	<u> </u>	<u> </u>					
Date of Issue	:		-			-						DD-														
Date of Expire	:		-			-					(DD-	MM	-Y	ΥY	Y)										
I hereby declare that the statements given a	ove a	re tru	e an	d I ur	nders	stan	d tha	at ev	en i	f gra	ant	ed a	visa	,												
admission at the airport remains the discreti	on of	the In	nigra	ation	auth	oriti	ies iı	n Inc	lone	esia.																
Applicant's Signature																										
Typhoun o Digmune																										
						_																				
Prague -	_] -					(I	DD-N	MM-	ΥY	ΥY)															

 $[\]ensuremath{^{*}}$ To be completed $% \ensuremath{^{*}}$ with one original photograph attached.

^{*} Passport must be valid at least six months.