## High Commission for the People's Republic of Bangladesh 28 Queens Gate, London SW7 5JA Telephone: 020 7584 0081 - Fax: 020 7581 7477 / 020 7584 4551 - Website: bhclondon.org.uk

## Bangladesh Visa Application Form

PLEASE TYPE/PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM (use BLOCK letters)					
01. FULL NAME ( First/Middle/Family Name	<b>:</b> )				
02. PLACE OF BIRTH ( City/State/Country)		03. DATE OF BIR			
04. NATIONALITY	05. SEX	06. MARITAL STATUS  Staple 3X copies photo		Staple 3X copies photo	
	☐ Male ☐ Female	☐ Married ☐ Unmarried ☐ Divorced ☐ Widowed		(37mm x 37mm)	
07. PROFESSION		08. TYPE OF VISA			
09. PASSPORT NUMBER	PASSPORT NUMBER 10. PLACE OF ISSUE		11. DATE	OF EXPIRY	
			// 20		
12. SPOUSE'S NAME	12. SPOUSE'S NAME NATIONALITY:				
13. FATHER'S NAME	NATIONALITY:				
14. MOTHER'S NAME					
15. HOME ADDRESS					
16. TELEPHONE 17. FA	X 1	8. E-MAIL			
19. BUSINESS / WORK ADDRESS					
20. TELEPHONE 21. FA	X 2	2. E-MAIL			
23. NAME OF EMPLOYER					
24. TELEPHONE 25. FA	X 2	6. E-MAIL			
27. PURPOSE OF VISIT (Please tick appropriate box)					
□ Tourism (Inc. tablig/ visiting relatives, etc) □ Business/ Investment □ Seminar/ Conference/ Govt. Delegation □ Cultural/ Scientific Programme □ Missionary □ NGO Works □ Official □ Expert(s)/ Worker(s)/ Teacher(s)/ Representative(s) in industrial/ Educational/ Trading Org. / Sports/ A rtistic activities etc. □ Govt. contractual employment □ Study / Research □ Employment in UN / International Org. □ Journalist / Media (Print & Electronic) □ Others (Please Specify)					
28. NAME AND ADDRESS OF PERSON(S), INSTITUTION OR COMPANY WHERE YOU CAN BECONTACTED WHEN YOU WILL BE IN BANGLADESH (In detail Phone no, Mobile no, E-mail Etc.)					
29. ADDRESS WHILE IN BANGLADESH			30. TELEPHONE		
31. PLACE AND PROBA BLEDATE OF ARRIVAL			32. INTENDED DURATION OF STAY		
33. HAVE YOU EVER BEEN TO BANGLADESH					
34. IF YES, DATE AND LENGTH OF LAST VISIT  ☐ Yes ☐ No					
35. NAME AND RELATIONSHIP OF PERSON(S), TRAVELLING WITH YOU					
36. DECLARATION					
I Declare that the above information is true and accurate					
NAME	DATE		_ SIGN ATURE		
Please ensure that you have answered I tems I through 35 and signed the D eclaration. I ncomplete forms wi I I be returned.					