

CONSULATE GENERAL OF THE UNION OF MYANMAR

10 East 77 Street, New York, NY 10075

Tel: (212) 744 1271 Fax: (212) 744 1290

Entry Visa

Validity of Visa : 3 months from the date of issue

Stay: 4 weeks stay , may be extended in Myanmar

1. Valid National Passport with blank pages
2. Old Myanmar Passport (if required)
3. One Arrival Report Form
4. Two Entry Visa Forms
5. Work History
6. Personal History
7. Four recent passport photos
8. Visa Fee - \$ 30.00 (cash/money order)
9. Flight itinerary/Schedule
10. Personal Interview required

GOVERNMENT OF THE UNION OF MYANMAR
Immigration Department
REPORT OF ARRIVAL

Name is directed to deliver this report to the immigration Authorities on arrival in Myanmar.

Passport No.

Place and Date of Issue

Visa No. and Date.

Authority, if any

Full address in Myanmar

Name and Address of Reference

or Guarantor in Myanmar

.....

PHOTO

.....
Signature of Passport Holder

Visa Issuing Officer
Date of Issue

Date of Departure from USA

Date of Arrival in Myanmar

Date of Expiry of Stay in Myanmar

DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION
IMMIGRATION DEPARTMENT
APPLICATION FOR ENTRY VISA

(To be handed over to the immigration officer at the airport.)

1. Name PHOTO
2. Father's Name in Full
3. Nationality 4. Sex
5. Date of Birth 6. Place of Birth
7. Occupation
8. Personal description
(a) Colour of Hair (b) Height
- (c) Colour of eyes (d) Complexion
9. Passport
(a) Number (b) Date of Issue
- (c) Place of Issue (d) Issuing Authority
- (e) Date of Expiry
10. Permanent Address
11. Address in Myanmar
12. Purpose of entry into Myanmar
13. Name and address of guarantor during stay in Myanmar
14. Financial resources in Myanmar
(a) Cash (Kyats and Foreign Currency)
- (b) Bank deposit
- (c) Name of Bank
- (d) Amount
15. Attention for Applicants
(a) Apart from the professions mentioned in this visa application are not to engage in any sort of work with or without changes.
(b) Applicant shall abide by the laws of the Union of Myanmar and shall not interfere in the internal affairs of the Union of Myanmar.
(c) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Union of Myanmar.

I hereby declare that I fully understand the above mentioned conditions that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

16. Daytime phone no.

Date

.....
Signature of applicant

.....
(FOR OFFICIAL USE ONLY)

Visa No. Date

Visa Authority

Date

Place

Signature of Office-in-charge
Consulate General of the Union of Myanmar
New York

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Date

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Signature of applicant

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Visa No. Date

Visa Authority

Date

Place

Signature of Office-in-charge
Consulate General of the Union of Myanmar
New York

CONSULATE GENERAL OF THE UNION OF MYANMAR
Work History for Visa Applicant

1. Name :
.....
2. Date of Birth/Place of Birth (City/Town, State/Province, Country)
.....
3. Permanent Home Address: (No., Street Name, Apt. No., City/Town, State/Province, Country)
.....
.....
4. Telephone Number
Home: Work:
5. Work Description – Current:
(a) Job Title:..... Form-To (mm-yy).....
(b) Office/Section/Division
(c) Describe your Duties:
.....
6. Work Description – Previous
(a) Job Title:..... Form-To (mm-yy).....
(b) Office/Section/Division
(c) Describe your Duties:
.....
7. Work Description – Previous
(a) Job Title:..... Form-To (mm-yy).....
(b) Office/Section/Division
(c) Describe your Duties:
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Date:

Signature of Applicant