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Muckleneuk, Brooklyn, Pretoria, 0181
P.O. Box 12546 Hatfield 0028 Digital
Land Line: 087-945 1307 Email:
consular@iranembassy.org.za

Reference No:

Visa No:

Date of issue:

APPLICATION FOR ENTRY VISA

PERSONAL DETAILS

1. First name:
2. Middle name:
3. Surname:
4. Former name:
5. Father's name:
6. Date of birth:
7. Place of birth:
8. Marital status: Married Single
- (If married) Name of spouse:

PASSPORT DETAILS

9. Passport number:
10. Passport type:
11. Date of issue:
12. Date of expiry:
13. Place of issue:
14. Nationality: a. Present: b. Previous:

EMPLOYMENT AND CONTACT DETAILS

15. Occupation:
16. Employer:
17. Work address:
18. Work telephone No. | Cell Phone No.:
19. Home address:
20. Home telephone No. | Cell Phone No.:
21. Email address:



DETAILS OF STAY IN IRAN

22. Category of visa requested: (Place X in appropriate box)

a.

Transit Tourist Pilgrimage Business Work Permit

b.

Single Double Multiple

23. Contact details in IRAN (name, address, and telephone no. in IRAN of persons and organisations you intent to meet or stay with)

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24. Purpose of trip to Islamic Republic of IRAN:

25. How long is your plan to stay in IRAN:

26. Approximate date of entry:

27. Border of entry:

28. Who covers your expenses while staying in IRAN?

29. How much money will you be carrying with you?

30. Have you ever been to IRAN before? Yes No

(If yes to above) Which cities and dates of visit:

31. Has your visa application ever been rejected? Yes No

(If yes) Where and when was application made?

32. If in transit in IRAN, do you have visa for next destination? Yes No

33. Write the name and relationship of person traveling with you on your passport:

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I DECLARE THE ABOVE INFORMATION IS TRUE AND CORRECT. I UNDERTAKE TO OBSERVE ALL LAWS AND REGULATIONS APPLICABLE TO FOREIGN NATIONALS.

Signature: Date: