

VISA APPLICATION FORM

Consular Section of the Royal Embassy of Cambodia 64 Brondesbury Park, Willesden Green, London NW6 7AT. United Kingdom. Tel: 020-8451 7850 - Fax: 020-8451 7594 Website: www.cambodianembassy.org.uk E-mail: visaenquiries@cambodianembassy.org.uk

One photo of applicant and of each child

_ _ _ _ _ _ _ _ _ _

Use block/capital letters to complete this form and use date format as the following dd/mm/yyyy. (*) Compulsory fields.

Surname [*] :	Gender*: Male Female	
	Birth nationality*:	
First name*:	Present nationality*:	
	Home address*:	
Date of birth*:		
Place of birth*:		
Visa Type*:	Home phone*:	
□ Tourist □ Business □ Transit	Mobile phone*:	
Diplomatic Official Courtesy	Email:	
□ Visa "K" (Cambodian National)	Present occupation*:	
Date of entry*:	Name and address of your present employer/organization/company whom you work for (not applicable if unemployed):	
Date of exit*:	whom you work for (not applicable if unemployed).	
Point of entry*:		
Mean of transportation*:		
Passport No*:	Name and address of hotel/accommodation where you will be staying or organization/company/person(s) you will be visiting during your stay in Cambodia:	
Place of issue*:		
Issue date*:		
Expiry date*:		
Date of previous visit in Cambodia:		

Use the box below for any child(ren) under the age of 12 years old travelling with you and who share(s) the same Passport with you. Use a separate sheet of paper, if the provided space is not sufficient.

Surname	First name	Date of birth	Gender

Applicant's Signature*:

Date*:

(1) Any incomplete application form could be rejected and returned back to you without any notice.

(2) It is imperative to provide the Embassy your telephone number and email address for any further enquiries that may be required.

OFFICIAL USE ONLY	RECEIVER
Visa No:	Name:
Issue date:	Signature:
	Collection date:
	Number of Passport(s) collected: