

III PASSPORT INFORMATION

Passport/Travel Document Number :

Place of Issue :

Date of Issue : - - (DD-MM-YYYY)

Date of Expiry/Valid Until : - - (DD-MM-YYYY)

Type of Passport : Personal Family

Please complete this section if your spouse and/or dependants included on your passport/travel document are travelling with you :

No.	Relation(s)	Sex	Date of Birth (DD-MM-YYYY)	Name
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>

Please use this code :
 Relation(s) : 1:Husband 2:Wife 3:Child
 Sex : F:Female M:Male

IV SPONSOR IN INDONESIA (IF ANY)

Type of Sponsor : Individual Government International Institution
 Company NGO Others

Name of Person/Institution :

Address :

City :

Province/State :

Phone Number : - -

V OTHER INFORMATION

Have you ever been to Indonesia before? : Yes No

Are you in possession of any other countries' travel documents? : Yes No

Do you have previous visa to enter Indonesia? : Yes No

Has your visa application been refused before? : Yes No

Have you ever been deported from Indonesia? : Yes No

Have you ever committed a crime or any offense? : Yes No

Return/Through Ticket/Airline Company :

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I hereby declare that the statements given above are true and I understand that even if granted a visa, the admission at the airport remains the discretion of the immigration authorities in Indonesia

Applicant's Signature

Washington, D.C., - - (DD-MM-YYYY)

- Important Note :**
- * To be completed in duplicate with two passport size photographs attached
 - * Applicant's original signature is required
 - * Passport must be valid for at least six months
 - * Please contact the Embassy prior to mail the application, for further detail on the required supporting documents and completeness of your application
 - * It is very necessary that your application is filled out completely. Any incomplete data may affect your visa processing
 - * If you need assistance, do not hesitate to contact the Embassy