



**EMBASSY OF THE REPUBLIC OF KENYA
2249 R. ST. N. W.**

WASHINGTON, D. C. 20008

(202) 387 6101 Fax: (202) 462-3829

Tel:

**APPLICATION FORM FOR A VISA
(TO BE COMPLETED IN BLOCK LETTERS)**

SINGLE VISA MULTIPLE VISA TRANSIT VISA

1. a. Surname (Mr/Mrs/Miss) _____ b. Other Names _____
c. Full Names of Father/Husband/Wife _____
(Names of husband or wife in case of married persons or father, if unmarried)
2. a. Date of Birth _____ Country and Place of Birth _____ Sex _____
b. Profession/Occupation _____
3. a. Country of Residence _____
b. Nationality at Birth _____ c. Present Nationality, if different _____
4. Passport/Travel Document Held:
a. No. _____ Place & Date of Issue _____
b. Issued by _____ Valid Until _____
(Name of Authority Issuing Passport/Travel Document)
5. Contact address and telephone number in the US _____

6. a. Reason for Entry _____
b. Proposed Date of Entry _____ Duration of Stay _____
7. Full names and addresses of friends, firms or relatives to be visited, if any: _____

8. Dates and duration of previous visits to Kenya _____
9. Will you be returning to your Country of Residence/Domicile? _____
10. It should be noted that possession of a visas is not the final authority to enter Kenya.

I hereby declare that the foregoing particulars are correct in every detail.

Date _____ Signature of Applicant _____

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