



KINGDOM OF CAMBODIA
Nation – Religion – KING

Photo
Color
4 x 6

Royal Embassy of Cambodia
to Switzerland

VISA APPLICATION FORM
Please fill 1 form + 1 photo + 1 original passport + 1 passport copy

| | | | | | | |
|--|---------|--|-----|---|---------------|-------------------|
| Surname: | | Current occupation: | | | | |
| First name: | | Permanent address: | | | | |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | | Tel: | | | | |
| Date of birth: Day Month Year | | Fax: | | | | |
| Place of birth: | | E-mail: | | | | |
| Birth nationality: | | Workplace: | | | | |
| Current nationality: | | Tel: | | | | |
| Date of entry: Day Month Year | | Fax: | | | | |
| Date of departure: Day Month Year | | Reason of stay: <input type="checkbox"/> Diplomatic <input type="checkbox"/> Official <input type="checkbox"/> Tourist <input type="checkbox"/> Business <input type="checkbox"/> Others (please specify): | | | | |
| Address during the visit: | | Organization or person to be visited: | | | | |
| Point of entry: | | Point of exit: | | | | |
| Mean of transportation: | | Mean of transportation: | | | | |
| Passport No.: | | First trip to Cambodia: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Place of issue: | | Travel on tour group: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Date of issue: | | | | | | |
| Date of expiration: | | | | | | |
| Children under 12 year old travelling with your passport + 1 photo | Surname | First name | Sex | | Date of birth | Permanent address |
| | | | M | F | | |
| | | | | | | |
| Relatives in Cambodia | | | | | | |
| | | | | | | |

For official use

នគរបាល:

ទីតាំងរាយ:

ប្រភេទ:

ផ្លូវ: ខែ: ឆ្នាំ:

កម្ពុជាអាមេរិកទូលបន្ទុកកុងសុល

I hereby declare that the information on this
form are true and correct

Geneva,

Signature