



# EMBASSY OF THE HASHEMITE KINGDOM OF JORDAN

NEW DELHI

Consular Section

N 14 Panchsheel Park, New Delhi - 110017

Phone: +911126497031, +911126497032, Fax: +911126497030

E-mail: [jordan@jordanembassyindia.org](mailto:jordan@jordanembassyindia.org)

Website: [www.jordanembassyindia.org](http://www.jordanembassyindia.org)

staple or glue  
photo here

## VISA APPLICATION FORM

PLEASE TYPE OR PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM

1- FULL NAME:- _____ (First) (Middle) (last)			
2- DATE OF BIRTH: ____/____/____	3- PLACE OF BIRTH(CITY, STATE & COUNTRY):		4- SEX: <input type="radio"/> Male <input type="radio"/> Female
5- OCCUPATION:(PROFESSION)	6- NATIONALITY:	7- MARITAL STATUS: <input type="radio"/> Married <input type="radio"/> Unmarried	
7- FATHER'S/HUSBAND'S NAME:			
8- PERMANENT RESIDENCE AND ADDRESS: (PHONE) _____			
9- PASSPORT NUMBER:	10- ISSUED AT:	11- ISSUE DATE:	12- VALID UNTIL:
13- TYPE OF VISA REQUIRED: <input type="radio"/> Tourist <input type="radio"/> Business <input type="radio"/> Student <input type="radio"/> Entry <input type="radio"/> Transit <input type="radio"/> Others _____			14- NUMBER OF JOURNEYS: <input type="radio"/> Single <input type="radio"/> Double <input type="radio"/> Multiple
15- HAVE YOU EVER BEEN TO JORDAN? <input type="radio"/> Yes <input type="radio"/> No	- WHEN? _____ - FOR HOW LONG? _____		
16- REASONS OF VISIT: _____			
17- ADDRESS IN JORDAN: (PHONE) _____			
18- REFERENCE IN HOME COUNTRY: (PHONE) _____			
19- REFERENCE IN JORDAN: (PHONE) _____			
20- PERIOD OF STAY IN JORDAN:	21- NAMES OF FAMILY MEMBERS ACCOMPANYING:		

I, \_\_\_\_\_ hereby undertake that I shall utilize my visit to Jordan for the purpose for which the visa has been applied for and shall not, on arrival in Jordan, try to obtain employment or set up business or extend my stay for any other purpose.

PLACE:- \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of applicant: \_\_\_\_\_

FOR OFFICE USE ONLY	
ملاحظات القنصل	ختم التأشيرة
_____	رقم تأشيرة الدخول
_____	نوع التأشيرة الممنوحة
_____	تاريخ انتهاء صلاحية التأشيرة:
التوقيع: _____	في _____