

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR
3435, WILSHIRE BOULEVARD, SUITE 1590, L A., CA 90010, TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042
APPLICATION FOR BUSINESS VISA

1. Name in Full (Fill in Block Letters)

(First Name) / (Middle Name) / (Last Name)

2. Father's Full Name (First Name) (Middle Name) (Last Name)

3. Date of Birth (dd/mm/yy): / /

4. Place of Birth (City/State/Country) / /
(Official Name: Country is Myanmar, City is Yangon)

5. Nationality: U.S./ (Others): 4. Sex (F) / (M)

6. Present Occupation:
(If retired write "retired", if student write "student", if self employ: mention specifically)

7. Marital Status: Married Separated Divorced Widowed Single (Never Married)

8. Spouse's Full Name:

Passport

9. (a) Number (b) Date of Issue (dd/mm/yy) / /

(c) Date of Expiration (dd/mm/yy) / /

(d) Place of Issue: (e) Issuing Authority:
United States, United States, Department of State/
Other: National Passport Center/ (if others):

10. Present Address in U.S.
(Include apartment number, street, city, state or province & postal zone)

11. Contact Ph. No.(Res:)() (Work)() (Cell)() e-mail

12. Address in Myanmar:

13. Have you ever been to Myanmar: Yes No (If Yes) Date of Last Visit: (dd/mm/yy) / /

14. Have you ever been refused to enter Myanmar: Yes No (If Yes) When: (dd/mm/yy) / /
Why:

15. Expected date of Arrival: (dd/mm/yy) / / & Departure: (dd/mm/yy) / /

16. Name and address of Guarantor during stay in Myanmar

17. Attention for Applicant:

- (a) Apart from the professions mentioned this visa application from applicants are not to engage in any sort of work, with or without charges.
(b) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not interfere in the Internal Affairs of the Republic of the Union of Myanmar.
(c) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Republic of the Union of Myanmar.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

Signature of Applicant
Date (dd/mm/yy) / /

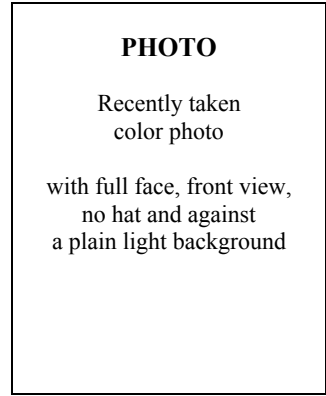
(FOR OFFICE USE ONLY)

Visa No. Date:

Visa Authority: MOFA Lt. No. 46 11 11 (110) Dated: 6 April 1994

(If other): MOFA Lt. No., Date: / /

Signature of Officer in-Charge
Consulate-General of the Republic of the Union of Myanmar, Los Angeles, U.S.A
Contact: Tel (213) 387-0041, (213)387-0043, Fax (213) 387-0042, e-mail: myancgla@gmail.com



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APPLICATION FOR BUSINESS VISA

1. Name in Full (Fill in Block Letters)

PHOTO

Recently taken color photo

with full face, front view, no hat and against a plain light background

(First Name) / (Middle Name) / (Last Name)

2. Father's Full Name (First Name) (Middle Name) (Last Name)

3. Date of Birth (dd/mm/yy): / /

4. Place of Birth (City/State/Country) / /
(Official Name: Country is Myanmar, City is Yangon)

5. Nationality: U.S./ (Others): 4. Sex (F) / (M)

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Signature of Applicant
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CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR
3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010
TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

Work History for Visa Applicant

1. Name in Full (Fill in block letters): _____
Surname (As in Passport): _____
First Name & Middle Name: _____
2. Date of birth (dd/mm/yy) _____ / _____ / _____
3. Place of birth: U.S., _____ (Other): _____
4. Permanent Home Address: _____

5. Tel. (Res.) (_____) _____ (Work Place) (_____) _____
(Cell) (_____) _____ e-mail: _____
6. Work Description (**Current**)
(a) Job Title: _____
From (dd/mm/yy) _____ / _____ / _____ To (dd/mm/yy) _____ / _____ / _____
(b) Office _____
Department _____
Describe your Duties: _____

7. Work Description (Previous)
(a) Job Title: _____
From (dd/mm/yy) _____ / _____ / _____ To (dd/mm/yy) _____ / _____ / _____
(b) Office _____
Department _____
Describe your Duties: _____

I hereby declare that the particular given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant
Date: (dd/mm/yy) _____ / _____ / _____