

High Commission for the People's Republic of Bangladesh

28 Queens Gate, London SW7 5JA

Telephone: 020 7584 0081 - Fax: 020 7581 7477 / 020 7584 4551 - Website: bhclondon.org.uk

Bangladesh Visa Application Form

PLEASE TYPE/PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM (use BLOCK letters)				
01. FULL NAME (First/ Middle/ Family Name)		Staple 3 x copies photo (37mm x 37mm)		
02. PLACE OF BIRTH (City/ State/ Country)	03. DATE OF BIRTH (dd/ mm/ yyyy) ____/____/____			
04. NATIONALITY	05. SEX <input type="checkbox"/> Male <input type="checkbox"/> Female			06. MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
07. PROFESSION	08. TYPE OF VISA			
09. PASSPORT NUMBER	10. PLACE OF ISSUE	11. DATE OF EXPIRY ____/____/20____		
12. SPOUSE'S NAME		NATIONALITY:		
13. FATHER'S NAME		NATIONALITY:		
14. MOTHER'S NAME		NATIONALITY:		
15. HOME ADDRESS				
16. TELEPHONE:	17. FAX:	18. E-MAIL		
19. BUSINESS/ WORK ADDRESS				
20. TELEPHONE:	21. FAX:	22. E-MAIL		
23. NAME OF EMPLOYER				
24. TELEPHONE:	25. FAX:	26. E-MAIL		
27. PURPOSE OF VISIT (Please tick appropriate box)				
<input type="checkbox"/> Tourism (Inc. tablig/ visiting relatives, etc) <input type="checkbox"/> Business/ Investment <input type="checkbox"/> Seminar/ Conference/ Govt. Delegation <input type="checkbox"/> Cultural/ Scientific Programme <input type="checkbox"/> Missionary <input type="checkbox"/> NGO Works <input type="checkbox"/> Official <input type="checkbox"/> Expert(s)/ Worker(s)/ Teacher(s)/ Representative(s) in industrial/ Educational/ Trading Org. / Sports/ Artistic activities etc. <input type="checkbox"/> Govt. contractual employment <input type="checkbox"/> Study / Research <input type="checkbox"/> Employment in UN/ International Org. <input type="checkbox"/> Journalist / Media (Print & Electronic) <input type="checkbox"/> Others (Please Specify)				
28. NAME AND ADDRESS OF PERSON(S), INSTITUTION OR COMPANY WHERE YOU CAN BE CONTACTED				
29. ADDRESS WHILE IN BANGLADESH		30. TELEPHONE		
31. PLACE AND PROBABLE DATE OF ARRIVAL		32. INTENDED DURATION OF STAY		
33. HAVE YOU EVER BEEN TO BANGLADESH <input type="checkbox"/> Yes <input type="checkbox"/> No		34. IF YES, DATE AND LENGTH OF LAST VISIT		
35. NAME AND RELATIONSHIP OF PERSON(S), TRAVELLING WITH YOU				
36. DECLARATION I Declare that the above information is true and accurate				
NAME _____ DATE ____/____/____ SIGNATURE _____				
Please ensure that you have answered Items 1 through 35 and signed the Declaration. Incomplete forms will be returned.				