

DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA

APPLICATION FOR VISA OR TRANSIT VISA [Section 7(1)(g) read with section 10A and 10B; Regulation 8(1)]

Failure to complete this application form in full may result in the visa being delayed or refused. Please use block letters and black ink only.

PERSONAL PARTICULARS

Surname:														
First names (in full):														
Maiden name:														
Previous surname(s):														
	Υ	Υ	Υ	Y	М	М	D	D						
Date of birth:									Count	ry of birth:				
Gender (write in full)														
Nationality:						If acquired by naturalisation, state original nationality:								
Where and when was present nationality obtained:														
Passport / Travel Document Number:						Passport Issuing authority:								
Type of document: Diplomatic / Official / Ordinary Passport / Travel Document / other (specify):						Date o	Date of expiry:							
Permanent residential address in the country of normal residence:														
Period resident at this address:								Telephone number No.: (Home) (Mobile)						
Country of permanent residence:								E-mail address:						
Occupation or profession:								Period resident in Iran:						
Name of Employer, University, organisation:														
Address:														
Telephone No.:Fax No.:Fax No.:														
If self-employed, state name, address, telephone no. and nature of business :														
Name of business:														
Address:														
Telephone No.: Fax No.														
Marital status:	Never marrie			Marrie	ed		Widov	ved	Separated		d		Divorced	
First name(s) of spouse:							I							
Surname:														
Date and place of marriage														
	Υ	Υ	Y	Υ	М	М	D	D						
Date of birth of spouse:									Nation	ality:				

VISIT TO SOUTH AFRI	ICA									
Expected date of arrival	in the Repu	blic:	YEAR:		MONTH:		DAY:			
Place of arrival:	Place of arrival:									
Purpose of visit:										
Duration of stay (months	s, weeks or	days):								
Number of entries required:			Single:		Two:		Multiple:			
Proposed residential address (physical) in the Republic, including the full name(s) of your host or hotel:										
Residential (physical) A	ddress in the	e Republic:								
Name of Host or Hotel:										
Telephone of Host or Ho	otel:									
Names of organisations	or persons	you will be contacting	during your sta	ay in the Repu	blic:					
Name				Address			Relationship			
Identity document number or permanent residence permit number of South African host, where applicable:										
,	<u> </u>									
Indicate by means of an	X whicheve	er is applicable								
Have you at any time applied for a permit to settle permanently in South Africa?							Yes	No		
Have you ever been restricted or refused entry into South Africa?							Yes	No		
Have you ever been deported from or ordered to leave South Africa?							Yes	No		
Have you ever been convicted of any crime in any country?							Yes Yes	No		
Is a criminal action pending against you in any country? Are you an unrehabilitated insolvent?							Yes	No No		
Are you suffering from tuberculosis or any other infectious or contagious disease or any mental or physical deficiency?						Yes	No			
Have you ever been judicially declared incompetent?						Yes	No			
Are you a member of or adherent to an association or organisation advocating the practice of social violence or racial						Yes	140			
hatred or are you or have you been a member of an organisation or association utilizing crime or terrorism to pursue its ends?							No			
Give particulars if reply to any of the questions above is in the affirmative:										
In the case of an official visit, submission of a Note Verbale.										
In the case of a diplomat placed in the Republic, proof of such placement.										
To be completed only by passengers in transit to another country:										
Destination after leaving the Republic:										
Mode of travel to destination:										
Intended date and port of departure from the Republic to that destination:										
Do you hold a visa or pe	ermit for tem	porary or permanent re	esidence in the	e country of yo	our destination?	(Proof must be su	ubmitted):			

I(surname and name of applicant)declare that								
* the above details provided by me are true in substance and in fact and that I fully understand the meaning thereof;								
* I understand that should my port of entry visa / transit visa/visitor's visa be approved, I would not be allowed to change my purpose of visit whilst in the Republic;								
* I understand that if I need to extend my stay in the Republic for whatever reason, that such an application will only be accepted if it is submitted at least 30 days prior to the expiry date of my current visa; and								
* I understand that if I depart from the Republic after the expiry date of my visa, I would be declared an undesirable person and would not be readmitted for a certain period of time.								
Signature of applicant	Date	Date						
FOR OFFICIAL USE								
Approved/not approved by:	Type of visa:	Reasons for decision:						
an								