EMBASSY
OF THE REPUBLIC OF INDONESIA
MEXICO CITY

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FORM OF VISA

ATTENTION

1. Fill out this form using CAPITAL LETTERS and BLACK INK.
2. Fill the box with asterisk (*) with suitable choice.
3. Fill the box with two asterisks (**) for whom apply Limited Stay Visa who wants to work in Indonesia.
4. Fill the date boxes with date-month-year in sequence, each of it consists two digits.
   EXAMPLE: 26 January 2008
   2 6 0 1 0 8

1 Application *

Date of Application

1. Transit Visa
2. Single Visit Visa
3. Multiple Visit Visa
4. Limited Stay Visa

2 Full Name

Sex *
1. L - Male
2. P - Female

Place of Birth

Date of Birth

Nationality

Passport/Travel Document No.

Date of Issue

Place of Issue

Expiry Date

Occupation in Indonesia **

Occupation Abroad

Address of Office / Occupation

TELP / HP

Address of Residence in Indonesia

TELP / HP

Address of Residence in Abroad

TELP / HP

Email Address

Reason of Applying Visa / Port and Date of Entry

Length of intended stay in Indonesia

day (s)

Name of Reference in Indonesia

Address of Reference in Indonesia

TELP / HP

All of the statement and data declared in this form is legal and based on real situation, should in the future be found that this statement is not true, I am willing to be sued according to the prevailing regulation.

PASFOTO
3 x 4

SIGNATURE OF APPLICANT

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3

CATATAN PETUGAS LOKET

Lapmpiran Persyaratan:

- ☐ Surat Sponsor
- ☐ Copy Paspor/Dokumen Perjalanan
- ☐ Copy Surat Persetujuan Dirjenim
- ☐ Pasfoto terbaru larat belakang merah
- ☐ Daftar riwayat hidup
- ☐ Tiket Pesawat PP

Paraf Petugas

____

CATATAN PETUGAS TATA USAHA

Nomor Visa ……………………………………………………………. Indeks Visa …………………………….

Tgl Dikeluarkan ……………………………. Berlaku s/d …………………………………..

Tempat Dikeluarkan ………………………………………………………………………………………………..

Nomor Persetujuan Dirjenim

Tanggal

Paraf Petugas,

____

CATATAN PEJABAT PERWAKILAN RI

NIORA ……………………………………….. Tanggal ………………………………….	Kelengkapan persyaratan Lengkap …… Tidak ……. Tanggal ……………………………..
Daftar Cekal Tercantum ……. Tidak …… Kelainan surat Ada ……. Tidak …… Tanggal ………………………..	Persetujuan Setuju ……. Tidak …… Tanggal ……………………. A.n. Kepala Perwakilan RI ____________________