



**THE EMBASSY OF THE REPUBLIC OF INDONESIA
IN NAIROBI, KENYA**

**ACCREDITED TO REPUBLIC OF SEYCHELLES, REPUBLIC OF UGANDA, REPUBLIC OF MAURITIUS,
DEMOCRATIC OF THE CONGO, FEDERAL REPUBLIC OF SOMALIA, UNEP AND UN-HABITAT**

P.O. BOX 48868-00100, Upper Hill, Nairobi, Kenya

☎ +254 20 27141 96/97

Email: protkons.nairobi@kemlu.go.id

Photograph
2x3

VISA APPLICATION FORM

I. GENERAL

Length of Stay in Indonesia :	Day(s)	Month(s)	Years(s)		
Type of Visa :	<input type="checkbox"/> Transit	<input type="checkbox"/> Single Visit	<input type="checkbox"/> Multiple Visit	<input type="checkbox"/> Limited Stay	
For Transit Purpose					
Country of Destination :					
Port of Destination :					
Flight/Vessel Name :					
For Visit Purpose					
Purpose of Visit :	<input type="checkbox"/> Tourism	<input type="checkbox"/> Convention	<input type="checkbox"/> Family Visit	<input type="checkbox"/> Sport	
	<input type="checkbox"/> Study	<input type="checkbox"/> Arts	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other	
Place of Visit :					
Flight/Vessel Name :					
For Limited Stay Purpose					
Purpose of Limited Stay :	<input type="checkbox"/> Work	<input type="checkbox"/> Joint Family	<input type="checkbox"/> Social	<input type="checkbox"/> Bussines	<input type="checkbox"/> Other
Address in Indonesia :					
City :					
Province :					
Phone Number :					
Port of Entry into Indonesia					
Date of Entry :	-	-	(DD-MM-YYYY)		

II. PERSONAL DATA

First Name :				Middle/Initial:	
Last Name :					
Sex :	<input type="checkbox"/> Male			<input type="checkbox"/> Female	
Marital Status :	<input type="checkbox"/> Single			<input type="checkbox"/> Married	
Place of Birth :					
Date of Birth :	-	-	(DD-MM-YYYY)		
Nationality :					
Address :					
City :				State:	Zip:
Phone Number :					

COMPANY DATA

Name of Company/Institution :
Address :
City : State: Zip:
Phone Number : Email:
Occupation/Position :

III. PASSPORT INFORMATION & FOREIGN RESIDENT ID

Passport/Travel Document Number :
Place of Issue :
Date of Issue : - - (DD-MM-YYYY)
Date of Expired : - - (DD-MM-YYYY)
Foreign Resident ID No :
Date of Expired :

IV. SPONSORSHIP IN INDONESIA

Type of Sponsor : Individual Government International Institution
Company NGO Others
Name of Sponsor :
Address :
City : State: Zip:
Phone Number :

V. MISCELLANEOUS

Have You ever been to Indonesia before : Yes No
Are You in possession of any other countries travel documents : Yes No
Do You have previous visa to enter Indonesia : Yes No
Have Your visa application been denied before : Yes No
Have You ever been forced to leave Indonesia : Yes No
Have You ever been committed a crime or any offence : Yes No

Return/Through Ticket :
Place of Issue :
Date of Issue : - - (DD-MM-YYYY)
Date of Expired : - - (DD-MM-YYYY)

I hereby declare that the statements given above are true and I understand that even of granted a visa, admission at the airport remains the discretion of the Immigration authorities in Indonesia.

Applicant's Signature

Empty box for Applicant's Signature

..... (Place, DD-MM-YYYY)