

IMPORTANT

To be completed in block letters

The permission of the Ministry of Home Affairs & Immigration must be obtained before:

- A) The purpose and period of residence may be changed; or
- B) Employment is accepted; or
- C) Employment/employer may be changed; or
- D) Study offer is accepted; or
- E) Learning institution is changed.



Immigration Control Act 7 of 1993
Arrival Form
(Section 8 & 29 Regulation 2)

Departure From Namibia Regulation Act 1993
(Act 34 of 1993)

Departure Form
(Section 9A/Regulation 3)

ARRIVAL / DEPARTURE FORM

DEPARTING PASSENGERS ANSWER ONLY QUESTION 1-14.

ARRIVING PASSENGERS, PLEASE ANSWER QUESTIONS 1-19. DO NOT FORGET SIGNATURE AND DATE.

1. Surname (Family name): _____ 2. First Name (s): _____

3. Maiden Name _____

4. Sex (tick): Male Female 5. Date of Birth: Day : Month : Year : : :

6. Country of Birth (State country): _____ 7. Country of present residence: _____

8. Nationality of passport: _____ 9. Passport Number: _____

10. Passport Expiry Date: Day : Month : Year : : :

11. Number of accompanying children under the age of 16: Male Female

12. Mode of Travel (Please tick one box):

Air Flight No _____ 13. Occupation: _____

Road Reg No _____ Sea Name of Vessel _____

Rail Other Specify: _____

14. Physical Address in Namibia: _____

15. Purpose of Entry (Tick one box):

Namibian Citizen PRP Holder Visiting Friends/Relatives Holiday/Tourist/Recreation

In Transit/Stopover Diplomat Business/Conference/Professional ORP, EP & SP Holders

Other (Please specify): _____

16. Length and intended stay in Namibia: Days/Weeks/Months _____

17. Visitors to Namibia, kindly state the amount of money you intend to spend during your visit (excluding fare to and from Namibia): _____

18. Contact Person _____ 19. Contact Number _____

I declare that the above information is correct to the best of my knowledge.

Signature: _____ Date: _____

Official use only (Date Stamp)

Signature of Immigration Officer

VISA NUMBER: _____ Number of days granted: _____

VISA TYPE: _____

OFFICE OF ISSUE: _____

N PRP T, ST T/S B, C, P D O

SERIAL NO: A