



84 Holland Park
London W11 3SB
Tel: 020 7727 0771
Fax: 020 7792 9353
www.cameroonhighcommission.co.uk
highcom@cameroonhighcommission.co.uk

VISA APPLICATION FORM

Surname:

First Names:

Date & Place of Birth:

Name & First Names of Father

Name & First Names of Mother:

Nationality of Origin:

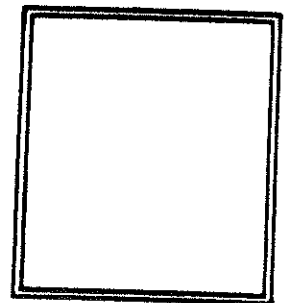
Current Nationality:

Family Status (Single/Married/Divorced/Widowed):

Name and First Names of Spouse:

Children (*In case they are travelling with you*)

Photograph



Names	Date & Place of Birth	Nationality	Profession

Type of Passport or Travel Document

Ordinary Passport () Other Document (Precise Type)

Passport N° Date of Issue:

Place of Issue: Expiry Date:

Issuing Authority:

Profession:

Employer:

Exact Address and telephone number:

.....

PTO

Main Destination in Cameroon:

Purpose for Trip/Stay

Address in Cameroon during Stay and telephone number:

Name and Status of contact in Cameroon:

Type of visa requested: Short stay () Transit () Long stay. ()

Duration of Stay in Cameroon: From To

Where do you intend to go after stay in Cameroon?

In case of transit: do you have authorisation to enter the country of Destination? Yes.() No ()

Means of transport used:

Done at on

Signature of Applicant

To be filled by the Mission

HIGH COMMISSION
LONDON, U.K

REGISTRATION N°.....
VISA: GRANTED:
On.....
REFUSED: