



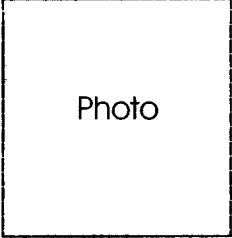
THE CONSULATE GENERAL OF THE REPUBLIC INDONESIA
10900 RICHMOND, TEXAS, 77042

Telp. (713)785-1691, Fax. (713)780-9644, E-mail :kjrihouston@prodigy.net, Web Site :www.indonesiahouston.org

VISA APPLICATION

Date : - -

Reg. No:



I. GENERAL

Length of Stay in Indonesia : Day(s) Month(s) Year(s)
Type of Visa : Transit Single Visit
 Multiple Visit Limited Stay

For Transit Purpose

Country of Destination :
Port of Departure :
Flight/Vessel Name :

For Visit Purpose

Purpose of Visit : Tourism Conversion Family Visit Sport
 Study Arts Commercial Other

Country of Destination :
Place of Visit :
Flight/Vessel Name :

For Limited Stay Purpose

Purpose of limited Stay : Work Joint Family Social Other

Address in Indonesia :
City :
Province :
Phone Number : - -

Port Of entry into Indonesia :
Date of entry : - - (DD-MM-YYYY)

II PERSONAL DATA

Passport Number : Date of Expire : - -
First Name :
Middle Name :
Family/Surname :

Sex : Male Female
Marital Status : Single Married

Place Of Birth :
Date of Birth : - - (DD-MM-YYYY)

Nationality :
Address :
City, State/Province :
Phone Number : - -

Occupation/ Position : Professional Government Sales
 Student House Wife Others

Name of Company :
Address :
City, State/Province :
Phone Number : - -

III. PASSPORT INFORMATION

Passport/Travel Document Number :

Place of Issue :

Date of Issue :

Date of Expire :

Type of Passport : Personal Family

Fill, if Family Passport:

No.	Relative(s):	Sex:	Date of Birth (DD-MM-YYYY):	Name:
<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="text"/>	<input type="text"/>
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<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="text"/>	<input type="text"/>

IV. SPONSORSHIP IN INDONESIA

Type of Sponsor : Individual Government International Institution
 Company NGO Others

Name of Sponsor :

Address :

City :

Province/State :

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/Airline Company :

Place of Issue :

Date of Issue : - - (DD-MM-YYYY)

Date Of Expire : - - (DD-MM-YYYY)

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

Applicant's Signature

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

***To be Complete in duplicate with two photographs attached.**
***Passport must be valid at least six months for Single Entry, and 18 months for Multiple Entry and Temporary Stay Visa.**