

EMBASSY OF THE REPUBLIC OF THE GAMBIA

Korovi Val Street, Building no. 7, Block 1, Office 11A 119049 MOSCOW, RUSSIAN FEDERATION

APPLICATION FORM FOR VISA

Last Name:	, First Name:	, Initials:	
Sex:MaleFe	emale		
Date of Birth: (//), Place of Birth:		
Nationality at Birth:	, Current Nat	ionality:,	
Profession / Occupation: _	·		
CURRENT ADDRESS			
Address:			
City:,	Province:	, Post Code:	,
Country:	,		
Phone Number:	,		
Marital Status:			
Purpose of Visit:			
Duration of visit:	,		
ADDRESS IN THE GAM	<u>IBIA</u>		
Address:			
City:,			
Passport Number:	, Place of Issu	e:	,
Date of Issue: (//)	Expiry Date: (//)
Previous visits to The Gam	bia:		
Date of Entry: (//)	Date of Departure:	/ /)

Tel: +7(495) 988-6205 Fax: +7 (495)988-6207 Photograph

REFERENCES IN THE GAMBIA 1. Name: Address: City: , 2. Name: Address: ______, I attest that all the information on this application is accurate to the best of my ability. I understand that I could be denied a Visa to enter The Gambia if the information is found to be incorrect. 3. Signature: , Date: (/ / ____) Print Name: , OFFICIAL USE ONLY Receiving Officer Name: Date: Action Taken Approved Refused Rejected Signature..... Visa No:

VISA APPLICATION REQUIREMENTS

Signature:

- Valid Passport
- One Passport- size photograph
- Completed and signed application form
- A non refundable application fee of 5,000 Rubles in cash only, payable to the Embassy of The Gambia

Rusiness

- Personal interview is required

VISA PICK UP HOURS

Monday and Wednesday from 10:00am to 2:00pm

Visa Type / No: Multiple Single Tourist

Tel: +7(495) 988-6205 Fax: +7 (495) 988-6207