VISA APPLICATION FORM FOR NEPAL

EMBASSY OF NEPAL VISA SECTION 12A, KENSINGTON PALACE GARDENS LONDON W8 4QU TEL: 020 7229 1594 FAX: 020 7792 9861 OPENING: MON – FRI 9.15AM-1PM, 2PM-3.15PM

PLEASE READ	GENERAL .	<i>INFORMATI</i>	ON BEFORE	FILLING	THIS FORM.
PLEASE FILL	THIS FORM	I IN BLOCK	LETTER.		

01. NAME (MR/MRS/MISS):			<u> </u>		
02. NATIONALITY:	2. NATIONALITY:03. OCCUPATION:				
04. DATE OF BIRTH:					
05. ADDRESS:			РНОТО		
CONTACT NO:	E-MAIL:				
06. PASSPORT NO:	07. ISSUED AT:				
08. DATE OF ISSUE:	09. DATE OF EXPIRY:				
10. EXPECTED DATE OF ARRIVAL IN NE	PAL:				
11. DURATION OF STAY IN NEPAL:					
12. ADDRESS IN NEPAL (IF KNOWN):					
13. PURPOSE OF VISIT: HOLIDAY/ TREK	KING/ MOUNTAINEEI	RING/ OTHERS			
14. DATE (S) OF PREVIOUS VISIT (S) TO	NEPAL, IF ANY:				
15. ACCOMPANYING CHILD(REN) OR WI					
	DATE OF BIRTH:				
16. TYPE OF VISA: A) DIPLOMATIC					
17. MULTIPLE ENTRY VISA A) 15 I	DAYS B) 3	0 DAYS	C) 90 DAYS		
18. IF YOU ARE RE-APPLYING WITHIN T	HE CURRENT VISA Y	EAR, PLEASE ME	ENTION YOUR		
LAST DATE OF ENTRY INTO NEPAL:					
DATE:	SINGNATURE	OF APPLICANT:			
	OR OFFICIAL USE				
Category of visa:	Signature of Vis	a officer:			
Date:	Serial & Sticker	Serial & Sticker No.:			
Remark:					