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| ***EMBASSY OF LEBANON***2560 28th Street, NW Washington, DC 20008Tel: (202) 939-6300Fax: (202) 939-6324[www.lebanonembassyus.org](http://www.lebanonembassyus.org/) | 14648452_125x125.jpgVISA APPLICATION FORM | **Attach Applicant’s Photo Here*** **white background**
* **front view, full face**

**must be recent picture** |
| 1-Full Name *(as per passport)* | Official Use Only |
| First | Middle | Last |
| 2 - Place of Birth*(city/state/country)* | 3 - Date of BirthDay Month Year | 4 - Sex* Male
* Female
 | Decision: |
|  |  |
| 5 - Present Nationality | 6 -Nationality of Origin | 7 – Date of issue Day Month Year | Type of Visa: |
|  |  |  |  |  |  |
| 8 – Passport Number: | 9 – Issuing Country: | 10 – Date of expirationDay Month Year |  |
|  |  |  |  |  |  |
| 11 - Address in the U.S.A. | 12 - Home Phone or Cell | Remarks: |
| Street Address: |
| City: |  State: | Zip Code: |
|  |  |  |  |  |
| 13 - Purpose of Trip (please check correct item):* Business
* Education
* Tourism
* Family
* Visit
* Official
* Other *(please specify)*
 | 14 - Employer (for students, name school/university) |
| 15 - Job Position or Title (for students, name major) |
| 16 - Business Address |
| 17 - Business Phone Number |
| 18 - Marital StatusSingle Married Divorced Separated  | 19 - If married, Provide Spouse Name |
| 20 - Have you ever been to Lebanon?* YES
* NO
 | 21 - If yes, provide the year of your most recent trip to Lebanon: |
| 22- Name and Address of **Contact Person**, **Institution or Company** in Lebanon: |
| 23 - Address in Lebanon where you will be staying *(e.g., hotel, friend, other)* | 24- Telephone Number in Lebanon |
| 25 - Expected Date of Arrival Day Month Year | Duration of Immediate Trip | Port of Entry |
|  |  |  |  |  |
| Type and duration of Visa requested:* **Single Entry** $88.00/Person ( ) 15 days ( ) One Month ( ) Three Months
* **Two Entry** $125/Person
* **Multiple Entry** $175/Person ( ) Three Month Multiple ( ) Six Month Multiple

***NB: The duration of the visa will start from the day it is issued***  |
| **I declare that all particulars made in this application are true and am aware that any false statement may lead to my application being declined.****Applicant’s Signature: Date: Day Month Year** |
| **Please view complete Visa Requirements and locate the Correct Consular Office for your Jurisdiction to mail by visiting our website at www.lebanonembassyus.org** |