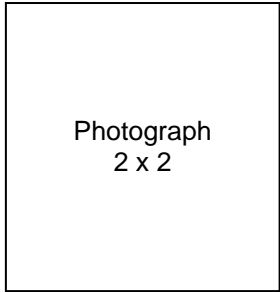


Dominican Republic  
**FOREIGN AFFAIRS OFFICE**  
 Consular Division  
**VISA APPLICATION**



Place and Date of Application Expected Date of Travel

Ship or Plane: \_\_\_\_\_ Ref: # \_\_\_\_\_

Port of Embarkation: \_\_\_\_\_

Last Name(s)		Have you ever been in the army, if yes, mention your last rank	
First Name(s)		Purpose of Journey	
Nationality		How long do you plan to stay	
Place and Date of Birth		Name of your friend or relative in the Dominican Republic	
Sex		His or Her address	
Skin color		Have you visited the Dominican Republic before?	
Eyes Color		When?	
Hair Color		Give the address where will you stay in the Dominican Republic	
Height and Weight		Which other countries have you visited?	
Marital Status		<b>Spouse's Information</b>  Full Name: _____ Nationality: _____  _____  Applicant's Signature	
Occupation			
Identifying Marks			
Address in Canada			
Last place of Employment			
Name of owner, Manager or Director Last Salary Drawn			
Contact No. in Canada			

The undersigned, holder of passport No. \_\_\_\_\_ Issued by \_\_\_\_\_ on \_\_\_\_\_  
 or I.D Document issued by \_\_\_\_\_ on \_\_\_\_\_

Certifies that he/she have read and understood all the questions set forth in this application and the answers on this form are true and correct. He/she understands that any false or misleading statement may result in the permanent refusal of visa or denial of entry into the Dominican Republic. He/she further understands that a possession of a visa does not entitle the bearer to enter the Dominican Republic upon arrival at port of entry if he or she is found inadmissible.

Visa Number \_\_\_\_\_ Issued in \_\_\_\_\_ Date \_\_\_\_\_  
 Number & Date of Visa authorization \_\_\_\_\_

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Position