

EMBASSY OF THE REPUBLIC OF LIBERIA
VIA CASSIA, 1207
00189 ROME

VISA APPLICATION FORM
(This form must be completed in BLOCK LETTERS)

1. Surname Other names
2. Sex Complexion/Special Peculiarities
3. Date & Place of Birth
4. Nationality: (Present) (Former):
5. Passport N°: Issued at: On:
Expiration date:
6. Marital Status: Single / Married / Divorced / Widowed
7. Profession:
8. Residential address: Tel. N°:
9. Official address: Tel. N°:
10. Date of last arrival in Liberia:
11. Period of stay in Liberia:
12. Purpose of visit: Date of travel:
13. If travel for employment state:
 - a) Name of employer and address:
 - b) Post to be occupied:
14. Reference in Liberia (Name and address):
15. Address in Liberia (not P.O. Box):

I HEREBY DECLARE THAT I AM FREE FROM ALL MENTAL AND CONTAGIOUS DISEASES EVIDENCED BY MEDICAL CERTIFICATE, THAT I HAVE NEVER BEEN CONVICTED OF ANY CRIME OR MISDEMEANOR BY ANY COURTS OF ITALY OR THOSE OF ANY OTHER COUNTRY.

Date: Signature:

(FOR OFFICIAL USE)

VISA N°: TYPE OF VISA:

FEES PAID: € Receipt N°: