EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR WASHINGTON DC APPLICATION FOR BUSINESS VISA

1.	Name in Full (In Block Letters)				
2.	Father's Full Name		Recently taken		
3.	Nationality	4. Sex \Box (F) / \Box (M)	Two color photos		
5.		6. Place of Birth	with full face, front view. no hat		
7.	Present Occupation		and against a plain light background		
8.	Marital Status: ☐ Married ☐ Separated ☐ Div	worced □ Widowed □ Single	(attached with staple)		
9.					
	Passport				
10.	(a) Number	(b) Date of Issue (dd/mm/yyyy)	/ /		
	(c) Place of issue	(d) Issuing Authority:			
	☐ United States	☐ United States, Department of Sta	ite /		
	☐ Other:	-			
	(e) Date of expiration (dd/mm/yyyy) /	/			
11.	Present address in US				
12.	Contact Tel. No. (Res.)	(Work)			
1 <i>J</i> .	Address in Myanmar Purpose of entry into Myanmar				
	Expected dt. of Arrival: (dd/mm/yyyy) /	/ & Denarture: (dd/mm/yyyy) /	/		
	Name and Address of Guarantor during stay in				
10.	Traine and Tradeoss of Guaranteer during stay in				
17.	Attention for Applicants				
	(a) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not interfere				
	in the internal affairs of the Republic	of the Union of Myanmar.			
	(b) Legal actions will be taken against those who violate or contravene any provision of the existing				
	laws, rules and regulations of the Republic of the Union of Myanmar.				
	ereby declare that I fully understand the a				
	ove are true and correct and that I will not ented herein.	ngage in any activities irrelevant to the	e purpose of entry		
Stat	ted nerein.				
		of Applicant			
	(FOR OFFI				
Vis	a No	Date			
Vis	a Authority				
Dat					
Pla	ce. Washington D.C, United States of Amer	rica Embassy of the Repui of Myanmar, Was			

Contact: Tel. (202) 332 4352, (202) 238 9332 Fax.(202) 332 4351. http://mewashingtondc.com, e-mail: mewdcusa@yahoo.com)

EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR WASHINGTON D.C.

Work History for Visa Applicant

1.	Full Name (Fill in block letters):			
	Surname (As in Passport):			
	First Name & Middle Name:			
2. Date of birth (dd/mm/yyyy)://				
3.	Place of birth: City; Country;			
	Permanent Home Address:			
5.	Tel. (Res.)			
	(Work Place)			
_	e-mail:			
0.	Work Description (Current) (a) Job Title:			
	(a) Job Title: To (dd/mm/yyyy): / /			
	(b) Office Department			
	Describe your duties:			
7.	Work Description (Previous)			
	(a) Job Title:			
	From (dd/mm/yyyy):/ To (dd/mm/yyyy):/			
	(b) Office			
	Department			
	Describe your duties:			
				
	I hereby declare that the particulars given above are true and correct.			
	Signature of Applicant			
	Date: (dd/mm/yyyy) / /			
	Date. (dd/filli/yyyy)/_//			

For Multiple Journey Entry Visa Applicant Only

(Note: First time visitors are not eligible to apply MJEV)

То	
Ambassador Embassy of the Republic o Washington D.C.	f the Union of Myanmar
	Date:
Subject: Request for Business Vi	sa (MJEV) (3 months / 6 months / 1 year)
I,	, have been to the Republic of the Union of try Visa in 19 / 20
Now, I would like to visit the Repul	try Visa in 19 / 20 blic of the Union of Myanmar with Multiple Journey Entry Visa for
(1) Completed Visa Application(2) Completed "Work History"	etion from the Myanmar Company and U.S. Company on the etterhead. copy payment of taxes imposed (USD 200) for Business Visa (3 months Multiple) (USD 400) for Business Visa (6 months Multiple) (USD 600) for Business Visa (1 Year Multiple)
	Sincerely,
	Signature: Name:
	Passport No