



MALDIVES IMMIGRATION
Male' Republic of Maldives

މާލެ ސަރުކާރުގެ ގެޒެޓް
ދިވެހިސަރުކާރުގެ ގެޒެޓް

APPLICATION FOR SPECIAL VISA

ސެޕެޝަލް ވިޝާ ޖެނަރަލް އެޕްލިކޭޝަން ފޯމް

[TO BE FILLED IN CAPITAL LETTERS]

DETAILS OF THE APPLICANT މަނިކުފާނުގެ ފޯމް

Name in full

Date of Birth D M Y Sex M male F female Nationality

Passport Number Date of Issue D M Y Date of Expiry D M Y

Purpose of Stay Occupation / Profession

Date of Arrival D M Y Flight Number Place of work

PHOTO
 [Photo Shall
 comply
 with Immigration
 Passport Photo Standard]

TO BE FILLED BY SPONSOR ފޯމް ފުރިހަމަކުރަންޖެހޭ ފަރާތް

Organization Name Registration No

Name of the signee Period Required Days Months

Designation Date D M Y Mobile Number

Seal of the sponsor if applicable
(އިތުރު ފޯމް ފުރިހަމަކުރަންޖެހޭނެއެވެ)

I / We here by agree to take full responsibility of above listed person during his / her stay in Maldives and ensure to conduct matters in accordance with the Immigration Laws and the regulations of the Rep. of Maldives.

މިއަދުގެ ފޯމް ފުރިހަމަކުރަންޖެހޭ ފަރާތް ދިވެހިރާއްޖޭގައި ދިރިރުހުމަށްފަހު ފުރިހަމަކުރަންޖެހޭ ފަރާތް ގެޒެޓް ފޯމް ފުރިހަމަކުރަންޖެހޭނެއެވެ.

Signature

OFFICIAL USE ONLY މަނިކުފާނުގެ ފޯމް

Approved by / ފޯމް ފުރިހަމަކުރަންޖެހޭ ފަރާތް

Name

Designation

Date D M Y Signature

Checked by / ފޯމް ފުރިހަމަކުރަންޖެހޭ ފަރާތް

Name

Designation

Date D M Y Signature

Visa Number

Date of Issue D M Y

Date of Expiry D M Y

Previous Visa Details

Payment Receipt Number

Amount Paid for Visa

Payment Accepted Officer

Date Payment Accepted D M Y

