



MALDIVES IMMIGRATION
Male' Republic of Maldives

މާލިއްޔާގެ ރިޕަބްލިކް
މިއުވަރުގެ ސަރުކާރު

APPLICATION FOR BUSINESS VISA

ބިޔަންސުގެ ވިޒާ ހޯދުމަށް ދާއިރާ

[TO BE FILLED IN CAPITAL LETTERS]

[Tick as appropriate] NEW BUSINESS VISA EXTENTION

DETAILS OF THE APPLICANT މަޢުލޫމާތު ފޯމު

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 މަސައްދާ ފޯމު

Organization Name Registration No

Name of the signee Period Required Months Year

Designation Date D M Y Mobile Number

Seal of the sponsor if applicable
(އިތުރު ފޮޓޯ ނުވަތަ ސަލްޞަފްޔާ)

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 ބިޔަންސަރުގެ ނަންމުގެ ދަށުން ބަޔާންކުރެވިފައިވާ ފަރާތަކާ ބެހޭ ގޮތުން ދިވެހިރާއްޖޭގެ ސަރުކާރުގެ ނިޔަލަށް ބަލަން ބޭނުންވާނެއެވެ. ދިވެހިރާއްޖޭގެ ސަރުކާރުގެ ނިޔަލަށް ބަލަން ބޭނުންވާނެއެވެ. ދިވެހިރާއްޖޭގެ ސަރުކާރުގެ ނިޔަލަށް ބަލަން ބޭނުންވާނެއެވެ.

Signature

OFFICIAL USE ONLY މާލިއްޔާގެ ސަރުކާރުގެ ބޭނުން ނުވަތަ ފޯމު

Approved by / ފޮތް ފޮނުވާ ފަރާތް

Name

Designation

Date D M Y Signature

Checked by / ފޮތް ފޮނުވާ 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

