



VISA APPLICATION FORM

Consular Section of the Royal Embassy of Cambodia
64 Brondesbury Park, Willesden Green, London NW6 7AT. United Kingdom.
Tel: 020-8451 7850 – Fax: 020-8451 7594
Website: www.cambodianembassy.org.uk
E-mail: visaenquiries@cambodianembassy.org.uk

One photo
of applicant and
of each child

Use block/capital letters to complete this form and use date format as the following dd/mm/yyyy. (*) Compulsory fields.

Surname*:	Gender*: <input type="checkbox"/> Male <input type="checkbox"/> Female
First name*:	Birth nationality*:
Date of birth*:	Present nationality*:
Place of birth*:	Home address*:
Home phone*:	
Mobile phone*:	
Email:	
Present occupation*:	
Name and address of your present employer/organization/company whom you work for (not applicable if unemployed):	
Name and address of hotel/accommodation where you will be staying or organization/company/person(s) you will be visiting during your stay in Cambodia:	
Visa Type*: <input type="checkbox"/> Tourist <input type="checkbox"/> Business <input type="checkbox"/> Transit <input type="checkbox"/> Diplomatic <input type="checkbox"/> Official <input type="checkbox"/> Courtesy <input type="checkbox"/> Visa "K" (Cambodian National)	
Date of entry*:	
Date of exit*:	
Point of entry*:	
Mean of transportation*:	
Passport No*:	
Place of issue*:	
Issue date*:	
Expiry date*:	
Date of previous visit in Cambodia:	

Use the box below for any child(ren) under the age of 12 years old travelling with you and who share(s) the same Passport with you. Use a separate sheet of paper, if the provided space is not sufficient.

Surname	First name	Date of birth	Gender

Applicant's Signature*:

Date*:

(1) Any incomplete application form could be rejected and returned back to you without any notice.

(2) It is imperative to provide the Embassy your telephone number and email address for any further enquiries that may be required.

OFFICIAL USE ONLY

Visa No:

Issue date:

RECEIVER

Name:

Signature:

Collection date:

Number of Passport(s) collected: