

1625 K Street NW Suite 750 Washington DC 20006 Tel: 888 466 0620 ♦ Email: <u>TRAVCOA@PinnacleTDS.com</u>

Visa requirements shown below are for CITIZENS OF THE U.S. ONLY. Nationals of all other countries please contact Pinnacle Travel Document Systems directly for specific requirements associated with your itinerary.

TRAVCOA				Southeast Asia		
World Leader in Luxury Travel				Experience		
Visa(s)	#	#	1 – F	Cost	Application	Expedite Fee
Req'd	Forms	Photos		Persons - 2	Deadline	Per Person
Myanmar	3	2	\$142.00	\$254.00	45 days prior to your departure	\$40.00

Cost per person beyond the first two is \$112.00 All visas will be issued for single entry. Given persistent delays with processing your visa for Myanmar may not be obtainable if documents are received after the deadline. Please use enclosed sample information verbatim and substitute your personal information.

Fees shown above include all necessary consular and service fees as well as the cost to ship your passport(s) back from our offices via FedEx within the continental U.S. (Please add \$30.00 to cover extra shipping costs for addresses in Alaska, Hawaii, or Canada.) We strongly suggest that you send your documents to us via FedEx or some other form of traceable overnight courier service.

Please enclose your actual passport along with two (2) photographs, two (2) completed visa application forms and one (1) completed Work History form. (Residents of AK, AZ, CA, NV, NM, OR, WA & HI must complete application form A. Residents of all other states must complete application form B. Please refer to your specific application sample when completing your documents.) Please also enclose two (2) clear photocopies of the vital information page of your passport, a copy of your flight itinerary showing entry and exit to Myanmar and your internal travel itinerary obtained from Travcoa. Photographs should be recently shot passport-type color photos with a clear background approximately 2" x 2" in dimension. (Note that machine or home photographs are not acceptable and photographs must be different than those in your current passport.) Your passport must be valid for a minimum of six (6) months beyond the completion of your international travel and must have at least three (3) blank unused pages available <u>not including those reserved for amendments and endorsements at the back of your passport</u>. Contact PTDS directly for assistance with renewal of or to add pages to your U.S. passport, as this can easily be done at the same time you apply for your visas.

Applications should be received in our offices no fewer than 70 days prior to your departure from your shipping address. Documents received after the deadline will be subject to the *per person* expediting fee shown above. (Please do not send your documents more than 90 days prior to the departure of your tour due to limited validity of the visa for Myanmar.) Special requests for passports to be expedited due to other travel plans prior to your tour departure may also require expediting fees. If you have international travel between the deadline above and the departure of your tour you may need to obtain a second passport in order to accommodate your travel. Please contact PTDS directly regarding any special processing needs or before submitting documents you expect may be received substantially after the deadline as there may be special requirements and/or additional fees to process your request. It may not be possible to cancel processing of your applications once they have been submitted.

Please note that consular fees, shipping fees and application requirements are subject to change without notice. Check or credit card payment accepted. Credit card payment subject to 3.5% surcharge.

PLEASE BE CERTAIN TO RETURN THE FOLLOWING TO: Pinnacle Travel Document Systems 1625 K Street NW Suite 750 Washington DC 20006

- Your actual passport (Please keep a photocopy for your records.)
- Your actual passport (Please keep a photocopy for your records.)
- This completed form
- Two (2) photocopies of the vital information page of passport
- Two (2) completed visa application forms per person for Myanmar
- One (1) completed Work History form per person for Myanmar
- One (1) copy of your flight itinerary showing entry and exit for Myanmar
- One (1) copy of your internal travel itinerary obtained from your tour operator
- Two (2) passport-type color photographs per person (Please leave loose, PTDS will affix.)
- Credit or debit card authorization below

PLEASE PRINT CLEARLY						
Full Name (1):	Full Name (2):					
Passport #: Exp	D:/ Passport #: Exp: Exp:/					
Home	Home Tel:					
Mailing	Work Tel:					
Address:	Email:					
(FedEx cannot deliver to PO b	Date of Departure from Home: ////////					
Address	Tour Name: Southeast Asia Experience					
For the	Date of Tour Departure: / / Month Day Year					
Return of	Special Instructions:					
Passport:						
Tel:						
for another international trip or when you	eriods prior to your tour during which you will need your passport will not be available to sign for the return of your passport.					
I will need my passport(s) for other interna	ational travel from//year to/_//year_					
I will not be at my home and/or return ship	oping address from//year_ to//year_/year_					
CREDIT CARD AUTHORIZATION: AMEX	/ VISA / MC (please circle one)					
	nature: Billing Zip Code:					
Card #:C	ID# Expires:/ Amount: US\$					
TRAVCOA PJ FLM (Myanmar25)75 FX 30 DL70DYS 40.00 3.5%	142/254 (APP FEE)12 3PGS VAL6MOS TE90DYS					
©2016 Pinnacle Travel Document Systems						

ONLINE ORDER COMPLETION & AUTOMATED UPDATES:

If you have not already done so please complete your order online. This will allow you to create an inbound FedEx shipping label to securely send your documents to us and pay all required fees online. This will also allow you to receive automated email updates regarding the progress of your documents. Please locate and click on the name or number of your specific program at the link below to complete your order.

www.PinnacleTDS.com/Travcoa

IMPORTANT NOTICE - PASSPORT PAGES & VALIDITY:

You must have at least three (3) blank unused pages available in your passport for visas and entry/exit stamps. In addition, your passport must be valid for six (6) months beyond the completion of your international travel. If you are a U.S. citizen and do not have the adequate number of pages or validity you will need to renew your passport since the U. S. Passport Agency will no longer add pages. Pinnacle Travel Document Systems can easily assist you with this at the same time your visas are being processed. The total additional fees for this service (including U.S. government expediting fee) is \$264.00 for passport renewals and second passports. We can also assist you with expediting first time passport applications.

You will need to complete an application form and a letter of authorization for PTDS and must send your actual passport to us. Specific requirements and the necessary forms are available for download from our Internet site:

Passport Renewals First Time Passports Second Passports <u>www.Traveldocs.com/PTDSPassports</u>

You may also contact us at <u>Travcoa@PinnacleTDS.com</u> or 888-466-0620 and we will send you an instruction kit.

OF AK AZ CA NV NM OR WA AND HI ONLY RI

ESID	ENTS OF AK, AZ, CA, NV, NM, OR, WA AND HEONLY.	10 N
Visa i	s valid for 3-months from the date of Issue	Copy No. 2
, iou i	CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MY	
	3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFOR	
		NIA 90010
	TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042	Official use only
1 2	APPLICATION FOR TOURIST VISA	\Box E.V.T (F.I.T)
1. N	ame in run (rin in Block Leueis)	E.V.T (Package Tour)
	JOHNATHAN / BONHAM / DOE	
2	(First Name) (Middle Name) (Last Name)	
	(Thist Maine) (Last Maine)	<u>چ</u>
2. F	ather's Full Name JOHANN / SEBASTIAN / DOE	
2. 1	(First Name) (Middle Name) (Last Name)	РНОТО
3. I	Date of Birth (dd/mm/yy): 13 / 03 / 1961	
	lace of Birth (City/State/Country)LOS ANGELES / CALIFORNIA / USA	Recently taken
		color photo
	Intionality: DUS./ D (Others):4. Sex D(F) / D(M) resent Occupation: ENGINEER	with full face, front view,
	If retired write "retired", if student write "student")	no hat and against
	farital Status: Darried Deparated Divorced Widowed Single (Never Married)	a plain light background
	pouse's Full Name: JOANNA BACH DOE	
	Personal Description	
	a) Color of Hair BROWN (b) Height: Im cm / Ift 6 in. 5	
	c) Color of Eyes_BLUE (d) Complexion_CAUCASIAN	4
	Passport a) Number 987654321 (b) Date of Issue (dd/mm/yy) 12 / 06 / 2010	
	c) Date of Expiration (dd/mm/yy) $11 \equiv / 06 / 2020$	
	d) Place of Issue: (e) Issuing Authority:	
(
	United States, United States, Department of State/	
	Other: INational Passport Center/ IOther:	
	resent Address in U.S. <u>1234 MAIN STREET, ANYWHERE CALIFORNIA</u> USA	
	Include apartment number, street, city, state or province & postal-zone)	
	Contact Ph. No.(Res:)(999) 888-7777 (Work)(/) N/A (Cell)(999) 666-3333	e-mail_JDOE@ABC.COM
	Address in Myanmar: Sule Shangri La Hotel No 223 Sule Pagoda Rd. Box 888 Yangon	
	Have you ever been to Myanmar: DYes DNO (If Yes) Date of Last Visit: (dd/mm/yy) /	//
	Have you ever been refused to enter Myanmar: Ves No (If Yes) When: (dd/mm/yy)/	/
	Why: PLEASE CONTACT PT/DS IF YES	
	Purpose of Visit: Tourism/ PRE PAID TOUR	
(Expected date of Arrival: P / Y / I Flight No. PY & Departure: P / Y / I	Flight No. PYI
	dd mm yy dd mm	ЛУ
	ntion for Applicant:	
(a) Apart from the professions mentioned this visa application from applicants are not to engage	in any sort of work, with or
2	without charges.	
(b) Applicant shall abide by the Laws of the Republic of the Union of Myanmar and shall not inter	fere in the Internal Affairs of
8	the Republic of the Union of Myanmar.	
(c) Legal action 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.	
	I hereby declare that I fully understand the above mentioned conditions, that the particula	ars given above are true and
	correct and that I will not engage in any activities irrelevant to the purpose of entry stated	herein.
Pl	LEASE DO NOT FORGET TO SIGN AND DATE ALL APPLIC	ATION FORMS

		Signature of Applicant Date (dd/mm/yy) / /
	(FOR OFFICE USE ONLY)	
Visa No.	Date:	
Visa Authority: MOFA Lt. No	. 46 11 11 (76) Dated: 11 March 1994	
(If other): MOFA Lt. No.	, Date:	

Signature of Officer in –Charge Consulate-General of the Republic of the Union of Myanmar, Los Angeles, U.S.A Contact: Tel (213) 387-0041, (213)387-0043, Fax (213) 387-0042, e-mail: <u>myancgla@gmail.com</u>

Up Dated: May 2015

RESIDENTS OF AK, AZ, CA, NV, NM, OR, WA AND HI ONLY.

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

Work History for Visa Applicant

1.	Name in Full (Fill in block letters): JOHNATHAN BONHAM DOE				
	Surname (As in Passport): DOE				
	First Name & Middle Name: JOHNATHAN BONHAM				
2.	Date of birth (dd/mm/yy) 13 / 03 / 1961				
3.	Place of birth: U.S., LOS ANGELES, CA U (Other):				
4.	Permanent Home Address: 1234 MAIN STREET, ANYWHERE CALIFORNIA USA 98765				
5.	Tel. (Res.)(999) 888-7777 (Work Place) () NOT APPLICABLE				
	(Cell) (999) 666-3333 e-mail: JDOE@ABC.COM				
6.	Work Description (Current)				
	(a) Job Title: ENGINEER				
	From (dd/mm/yy)_09 / 06 / 2000 To(dd/mm/yy)_08 / 09 / 2015				
	(b) Office ENGINEERING				
	Department ENGINEERING				
	Describe your Duties: ENGINEERING				
7.	Work Description (Previous)				
	(a) Job Title: PRODUCTION MANAGER				
	From (dd/mm/yy) 12 / 10 / 1990 To(dd/mm/yy) 08 / 06 / 2000				
	(b) Office PRODUCTION				
	Department_PRODUCTION				
	Describe your Duties: PRODUCTION				

I hereby declare that the particular given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

PLEASE DO NOT FORGET TO DATE AND SIGN ALL APPLICATIONS

Signat	ture of A	pplicant	
Date:(dd/mm/yy)	/	1	

Visa is valid for 3-months from the date of Issue CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

APPLICATION FOR TOURIST VISA

1. Name in Full (Fill in Block Letters)

1.	Ivanie in Fan (Fin in Dioek	Dettersy		E.V.T (Package Tour)
		11	IV.	
	(First Name)	(Middle Name)	(Last Name)	
2.	Father's Full Name	//	/	РНОТО
		(First Name) (Middle Name)	(Last Name)	moro
3.	Date of Birth (dd/mm/yy):_	/ // Country)////		Recently taken
4.	Place of Birth (City/State/C	country)/	/	color photo
5.	Nationality: U.S./ I (Oth	iers):	$4. \text{Sex } \square(F) / \square(M)$	
6.	Present ()cclination			with full face, front view,
	(If retired write "retired", if	student write "student")		no hat and against
7.	Marital Status: Married	Separated Divorced Widowed Sir	ngle (Never Married)	a plain light background
8.	Spouse's Full Name:			
	Personal Description			
9.	(a) Color of Hair	(b) Height: D mcm	/ 🛛 ft in.	
	(c) Color of Eyes	(d) Complexion		-
	Passport			
10.	(a) Number	(b) Date of Issue (dd/mm/yy)	//	
	(c) Date of Expiration (dd/n	nm/yy)//		
	(d) Place of Issue:	(e) Issuing Author	prity:	
	United States,	United State	es, Department of State/	
			ssport Center/ Other:	
11.	Present Address in U.S.			
	(Include apartment number	, street, city, state or province & postal	zone)	
12.	Contact Ph. No.(Res:)() (Work)()	(Cell)()	e-mail
13.	Address in Myanmar: Sule	e Shangri La Hotel No 223 Sule Page	oda Rd. Box 888 Yangon	
14.	Have you ever been to Mya	anmar: 🛛 Yes 🗖 No (If Yes) Date of Last	t Visit: (dd/mm/yy) /	/
15.	Have you ever been refused	d to enter Myanmar: 🛛 Yes 🖾 No (If Yes) When: (dd/mm/yy)	1
	Why:			
16.	Purpose of Visit: Tourism	a/ PRE-PAID TOUR		
		//Flight No	& Departure: / /	Flight No.
	а спорти и спорти и спорти и составляют с простоя на страните и страните и спорти и составляются на составляет По полни и страните и страните и составляются и страните и страните и страните и страните и страните и страните	dd mm yy	dd mm	
Att	ention for Applicant:			
	(a) Apart from the profes	sions mentioned this visa application	from applicants are not to enga	ge in any sort of work, with or
	without charges.			
	(b) Applicant shall abide	by the Laws of the Republic of the Uni	on of Myanmar and shall not in	terfere in the Internal Affairs of
	the Republic of the Ur	nion of Myanmar.		
	(c) Legal action will be ta	ken against those who violate or contra	vene any provision of the existing	ng laws, rules and regulations or
	the Republic of the Ur			
	I hereby declare that	I fully understand the above mention	ned conditions, that the partic	ulars given above are true and
	correct and that I wi	ll not engage in any activities irreleva	nt to the purpose of entry state	ed herein.
				ignature of Applicant
				m/yy)/
	N.T.	(FOR OFFICE USE	ONLY)	
	sa No.	Date:	2	
		No. 46 11 11 (76) Dated: 11 March	1994	
(If	other): MOFA Lt. No.	, Date:		

Signature of Officer in –Charge Consulate-General of the Republic of the Union of Myanmar, Los Angeles, U.S.A

Contact: Tel (213) 387-0041, (213) 387-0043, Fax (213) 387-0042, e-mail: <u>myancgla@gmail.com</u>

A

	Official	use	only
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D E.V.T (F.I.T)

Visa is valid for 3-months from the date of Issue Copy No. 2 CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042 Official use only

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APP	LICA	TION	FOR	TOU	RIST	VISA	

1. Name in Full (Fill in Block Letters)

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	(First Name)	_/////////	(Last Name)	
2.	Father's Full Name	// (First Name) (Middle Name)	/(Last Name)	РНОТО
3.	Date of Birth (dd/mm/szy).	(First Name) (Middle Name)	(Last Name)	
5. 4.	Place of Birth (City/State/Co	/ ///////	1	Recently taken
. 5.	Nationality: D U.S./ D (Oth	ers):	$\frac{1}{1} \int \frac{1}{1} $	color photo
6	Present Occupation:		4. SCA @(1') / @(1V1)	with full face, front view,
0.	(If retired write "retired", if	student write "student")		no hat and against
7.		Separated Divorced DWidowed DSi	nale (Never Married)	a plain light background
	The second s	ē.	ingle (ivever ivialiteu)	
0.	Personal Description			
0		(b) Height: Imcm	/ 🗍 🕀 🛛 📩 🗤	
9.	(a) Color of Eves	(d) Complexion	/ UltIII.	
	Passport			
10	(a) Number	(b) Date of Issue (dd/mm/yy) _	1 1	
10.	(c) Date of Expiration (dd/m	(0) Dute of issue (du/inin/yy)	//	
	(d) Place of Issue:	(e) Issuing Auth	ority	
	United States,		es, Department of State/	
	Other:		osport Conton/ DOther	
11	Present Address in U.S.	National Pa	issport Center/ DOther:	
11,		street, city, state or province & postal	7019)	
12	Contact Ph No (Res.))(Work)()	(Cell)()	a mail
13	Address in Myanmar: Sulo	Shangri La Hotel No 223 Sule Pag	oda Pd Box 888 Vang	e-man
14	Have you ever been to Mya	mar: IVes INo (If Ves) Date of Las	t Visit: (dd/mm/w)	//
15	Have you ever been to Wya	to enter Myanmar: D Ves D No (If Ve	(dd/mm/yy)	//
15.	Why:	to enter wryanniar. E res Erto (ir re	s) when. (du/min/yy)	//
16	Burnose of Visit: I Tourism			
10.	(Expected date of Arrival:	/ Flight No	& Departure	/ / Flight No
	(2	dd mm yy	dd	
Att	ention for Applicant:		- Service	iiiii yy
		ions mentioned this visa application	from applicants are not	to engage in any sort of work, with o
	without charges.		off	to engage in any solt of work, with o
		y the Laws of the Republic of the Un	ion of Myanmar and sha	ll not interfere in the Internal Affairs o
	the Republic of the Uni	on of Myanmar.		morrore in the mornar mining o
	(c) Legal action will be tak	en against those who violate or contra	avene any provision of th	e existing laws, rules and regulations o
	the Republic of the Uni	on of Myanmar.		
	I hereby declare that	I fully understand the above mention	ned conditions, that the	particulars given above are true and
	correct and that I will	not engage in any activities irreleva	ant to the purpose of ent	ry stated herein.
				Signature of Applicant
			Date	e (dd/mm/yy) / /
		(FOR OFFICE USE	ONLY)	
Vis	a No.	Date:		
Vis	a Authority: MOFA Lt. N	o. 46 11 11 (76) Dated: 11 March	1994	
		, Date:		
				Signature of Officer in -Charg
		0 1 0 1 0	1.11	

Consulate-General of the Republic of the Union of Myanmar, Los Angeles, U.S.A Contact: Tel (213) 387-0041, (213)387-0043, Fax (213) 387-0042, e-mail: myancgla@gmail.com

C E.V.T (F.I.T)

CONSULATE-GENERAL OF THE REPUBLIC OF THE UNION OF MYANMAR 3435, WILSHIRE BOULEVARD, SUITE 1590, LOS ANGELES, CALIFORNIA 90010 TEL (213) 387-0041, (213) 387-0043, Fax (213) 387-0042

Work History for Visa Applicant

Name in Full (Fill in block letters):
Surname (As in Passport):
First Name & Middle Name:
Date of birth (dd/mm/yy)/
Place of birth: 0 U.S., 0 (Other):
Permanent Home Address:
Tel. (Res.)()(Work Place) ()
(Cell) ()e-mail:
Work Description (Current)
(a) Job Title:
From (dd/mm/yy)/To(dd/mm/yy)//
(b) Office
Department
Describe your Duties:
Work Description (Previous)
(a) Job Title:
From (dd/mm/yy)// To(dd/mm/yy)//
(b) Office
Department
Describe your Duties:

I hereby declare that the particular given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant
Date:(dd/mm/yy) ____/

	GOVERNMENT OF THE REPUBLIC OF TH	IE UNION OF MYANMAR				
	MINISTRY OF IMMIGRATION AN	D POPULATION				
	DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION IMMIGRATION DEPARTMENT					
	APPLICATION FOR ENTRY TO	In a station of the spectrum of the second state of	рното			
1.	Name in full (In Block Letters) JOHNATHAN BONHA	AM DOE				
2.	Father's Name in full_JOHANN SEBASTIAN DOE					
3.	Nationality_USA	4. Sex MALE				
5.	Date of Birth MARCH 13, 1961	6. Place of Birth LOS ANGEL	ES, CA			
7.	Occupation ENGINEER					
8.	Personal description		\sim			
	(a) Color of hair BROWN	(b) Hight 6 FEET 2 INCHES				
	(c) Color of eyes_BLUE	(d) Complexion CAUCASIAN				
9.	Passport		1			
	(a) Number 9876543210	(b) Date of issue JANUARY 24	4,2010			
	(c) Place of issue US DEPT OF STATE	(d) Issuing Authority DEPT OF	STATE			
	(e) Date of expiry_JANUARY 23, 2020					
10.	Permanent address 1234 MAIN STREET ANYWHERE	, CA. USA				
11.	Address in Myanmar Sule Shangri La Hotel No 223 Su	ule Pagoda Rd. Box 888 Yangon				
12.	Purpose of entry into Myanmar TOURISM - PREPAI	DTOUR				
13.	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.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

PLEASE DO NOT FORGET TO SIGN AND DATE YOUR APPLICATION
Date Signature of Applicant

(FOR OFFICIAL USE ONLY)

Visa No.	
Visa Authority	

Date_____

Date

Place Washington D.C, United States of America

Embassy of the Republic of the Union Of Myanmar, Washington D.C

Washington D.C. Work History for Visa Applicant 1. Name in Full (Fill in block letters): JOHNATHAN BONHAM DOE Surname (As in Passport): DOE First Name & Middle Name: JOHNATHAN BONHAM	
Surname (As in Passport): DOE	
Surname (As in Passport): DOE	
First Name & Middle Name: JOHNATHAN BONHAM	
2. Date of birth (dd/mm/yyyy) <u>13</u> / <u>03</u> / <u>1961</u>	
3. Place of birth:	
 Place of birth. ^a (Other). ^b (Other). ^b (Other). ^b (Other)	
4. Fernalient nome Address.	
5. Tel. (Res.) (999) 888-7777 (Work Place) (996) 888-6666	1
e-mail: JDOE@ANYWHERE.COM	
6. Work Description (Current)	
(a) Job Title : ENGINEER	
From(dd/mm/yyyy): <u>09</u> / <u>07</u> / <u>2005</u> -To (dd/mm/yyyy) <u>06</u> / <u>25</u> / <u>20</u> 14	
(b) Office ENGINEERING	
Department ENGINEERING	
Describe your Duties: ENGINEERING	
7. Work Description (Previous)	
(a) Job Title: PRODUCTION MANAGER	
From (dd/mm/yyyy) 12 / 10 / 1990 To (dd/mm/yyyy) 09 /07 / 2005	
(b) Office PRODUCTION	
Department PRODUCTION	
Describe your Duties: PRODUCTION	

I hereby declare that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of my entry.

PLEASE DO NOT FORGET TO SIGN AND DATE YOUR APPLICATION

Signature of Applicant

R

Date: (dd/mm/yyyy) _ _ / _ _ / _ _ _

	GOVERNMENT OF THE REPUBLIC O MINISTRY OF IMMIGRATION		- CANAN CO
	DIRECTORATE OF IMMIGRATION ANI IMMIGRATION DEP APPLICATION FOR ENTRY	ARTMENT	рното
1.	Name in full (In Block Letters)		99 T. T. M
2.	Father's Name in full		
3.	Nationality	4. Sex	
5.	Date of Birth		
7.	Occupation		
8.	Personal description		
	(a) Color of hair	(b) Hight	
	(c) Color of eyes		
9.	Passport		
	(a) Number	(b) Date of issue	
	(c) Place of issue		
	(e) Date of expiry	-	
10.	Permanent address		
11.	Address in Myanmar Sule Shangri La Hotel No 2	223 Sule Pagoda Rd. Box 888 Yangon	
12.	Purpose of entry into Myanmar TOURISM - PRI	EPAID TOUR	
17	A thanking for Americante		

13. 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.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

Date

Signature of Applicant

(FOR OFFICIAL USE ONLY)

Visa No._____ Visa Authority

Date____

Date

Place Washington D.C, United States of America

Embassy of the Republic of the Union Of Myanmar, Washington D.C

	GOVERNMENT OF THE REPUBLIC O MINISTRY OF IMMIGRATION		- CANAN CO
	DIRECTORATE OF IMMIGRATION ANI IMMIGRATION DEP APPLICATION FOR ENTRY	ARTMENT	рното
1.	Name in full (In Block Letters)		99 T. T. M
2.	Father's Name in full		
3.	Nationality	4. Sex	
5.	Date of Birth		
7.	Occupation		
8.	Personal description		
	(a) Color of hair	(b) Hight	
	(c) Color of eyes		
9.	Passport		
	(a) Number	(b) Date of issue	
	(c) Place of issue		
	(e) Date of expiry	-	
10.	Permanent address		
11.	Address in Myanmar Sule Shangri La Hotel No 2	223 Sule Pagoda Rd. Box 888 Yangon	
12.	Purpose of entry into Myanmar TOURISM - PRI	EPAID TOUR	
17	A thanking for Americante		

13. 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.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

Date

Signature of Applicant

(FOR OFFICIAL USE ONLY)

Visa No._____ Visa Authority

Date____

Date

Place Washington D.C, United States of America

Embassy of the Republic of the Union Of Myanmar, Washington D.C

Embassy of the Republic of the Union of Myanmar Washington D.C. Work History for Visa Applicant

1.	Surr	e in Full (Fill in block letters): name (As in Passport): Name & Middle Name:
2.	Date	e of birth (dd/mm/yyyy) / /
3.	Place	e of birth: 🗖 U.S., 🗍 (Other):
4.	Pern	nanent Home Address:
5.		(Res.) () (Work Place) () ail:
6.	Worl	< Description (Current)
	(a)	Job Title :
		From(dd/mm/yyyy)://To (dd/mm/yyyy) / / /
	(b)	Office
		Department
		Describe your Duties:
7.	Worl	< 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 and that I will not engage in any activities irrelevant to the purpose of my entry.

Signature of Applicant

Date: (dd/mm/yyyy) _ _ / _ _ / _ _ _