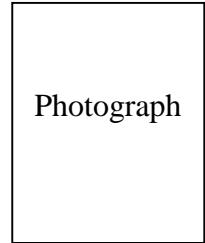




KINGDOM OF CAMBODIA
Nation Religion King
VISA APPLICATION FORM



**ROYAL EMBASSY OF CAMBODIA
 IN BERLIN**

Please fill the form with 1 photos
 and the original passport

Surname :		Present occupation :				
First name :		Place of residence :				
Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>		Fax/Phone :				
Date of birth : Day Month Year		Workplace :				
Place of birth :		Birth nationality :				
Birth nationality :		Present nationality :				
Passport or traveling document is valid for (country)		Purpose of visit <input type="checkbox"/> Diplomatic				
Date of entry to Cambodia Day Month Year		<input type="checkbox"/> Tourist <input type="checkbox"/> Official				
Date of departure (length of stay)		<input type="checkbox"/> Business <input type="checkbox"/> Others (Please Specify)				
Point of entry :		Point of exit :				
Means of Transportation :		Means of Transportation :				
Address during the visit :		Organization, Persons to be visited :				
Passport No :		First trip to Cambodia <input type="checkbox"/> Yes				
Place of issue:		<input type="checkbox"/> No				
Date of issue :		Travelling on group tour <input type="checkbox"/> Yes				
Date of expiration :		<input type="checkbox"/> No				
Children under 12 years traveling with you	Surname	First name Patronymic	Sex		Date of birth	Permanent Address
			M	F		
Relatives in the Kingdom of Cambodia						

For official use

ថ្ងៃផ្តល់

ទិដ្ឋាការលេខ

ប្រភេទ

ថ្ងៃ ខែ ឆ្នាំ

ហត្ថលេខាបង្គំទទួលបន្ទុកអគ្គការកុងស៊ុល

I hereby declare that the information
 on this form is true and correct
 Place (Date)

(Signature of the applicant)