BELIZEVISA APPLICATION FORM



MISSION/STATION:

VISA NUMBER:		DTD: _		
1. TRAVEL DATES				
1.1 On which date do you wish to travel to Belize? (day/r	month/year)	/	/	
1.2 On which date will you leave Belize? (day/month/year)		/	/	
2. APPLICANT INFORMATION				
2.1 Last Name	2.2 Given Names			
2.3 Gender	2.4 Date of Birth (da)	y/month/year)	/ /	
2.5 Place of Birth				
2.6 Country of Birth				
2.7 Nationality				
2.8 Do you hold or have ever held other nationalities (Ple	ase state)			
3. PASSPORT INFORMATION				
3.1 Passport Number				
3.2 Place of Issue	3.3 Issu	ing Authority		
3.4 Date of Issue (day/month/year) /	/ 3.5 Date	e of Expiry (day/month/yea	ar) / /	
3.6 Is this your first passport? YES NO				
3.7 Please give details of any previous passports covering the last 10 years including where these passports are now.				
4. CONTACT DETAILS				
4.1 Your full residential address and postal code				
4.2 How long have you lived at this address				
4.3 Home telephone number ()				
4.4 Mobile telephone number ()				
4.5 Email address				

4.6 Contact details if different from those above					
5. FAMILY IDENTITY					
5.1 Father's Name					
5.2 Father's date of birth (day/month/year)	/	1			
5.3 Father's nationality and place of birth					
5.4 Mother's name					
5.5 Mother's date of birth (day/month/year)	/	/			
5.6 Mother's nationality and place of birth					
5.7 Full name of spouse/partner					
5.8 Spouse/partner's date of birth	/	1			
5.9 Spouse/partner's nationality					
5.10 Does your spouse/partner currently live v	vith you at the address given?	YES NO			
5.11 If spouse does not live with you at addre	ss please give address				
5.12 Will your spouse/partner be travelling with you?					
5.13 Do you have any children?		YES NO			
5.14 Do all your children currently live with yo	YES NO				
5.15 Please provide full details for each of your dependant children					
5.16 Please list any of your children who will be travelling with you to Belize?					
5.17 Will any other children be travelling with you?					
5.18 If yes please provide full details about the child/children					
5.19 Name					
5.20 Date of Birth (day/month/year)	/ /				
5.21 Passport Number					

5.22 Address					
5.23 Place of Birth		5.24 Nationalit	5.24 Nationality		
5.25 Your relationship to child	5.25 Your relationship to child		tionship to their pare	ents	
6. FINANCES AND EMP	LOYMENT				
6.1 Are you employed full time?	YES NO	6.2 Are you emplo	oyed part-time?	YES [□ NO □
6.3 Are you self employed?	YES NO	6.4 Are you unem	ployed?	YES [□ NO □
6.5 Are you retired?	YES NO				
6.6 Are you a student, please give of	letails of the course and	I institution you atte	nd	YES [□ NO □
6.7 Are you supported by spouse/pa	artner/other family mem	nber? Please give de	tails.	YES [□ NO □
6.8 What is your present work or oc	cupation?				
6.9 What is the name of the compar	ny or organization you v	work for?			
6.10 When did you start this job?					
6.11 What is your work address?					
6.12 What are your employer's telep	phone numbers?				
6.13 What is your employer's email address?					
6.14 Please give details of any additional jobs or occupations you may have?					
6.15 Have you ever worked for any of the organizations listed below? Armed forces (including national service) YES NO					
Government (Central or local) Judiciary					
Media Public or civil administration Security (including police and private security companies)					
6.16 Please give details of every organization that you have worked for that is of a type in the list. Include name of organization job title or rank and dates (year to year)					
6.17 What is your total monthly income from all sources of employment or occupation?					
6.18 Do you receive income from any other sources including family or friends?				YES NO	
6.19 Do you have savings, property or other income (for example stocks and shares)?			YES NO		
6.20 How much of your total monthly income is given to your family members and other dependants?					
6.21 How much do you spend each month on living costs?					

6.22 What money is available to you for your trip?					
6.23 Who will pay for your travel to the Belize?					
6.24 Who will pay for your expenses such as food and a	ccommodation?				
6.25 If someone other than yourself is paying for all or a give your?	hey				
6.26 What is the cost to you personally of your stay in B	elize?				
7. TRAVEL HISTORY		'			
7.1 Have you travelled to Belize in the last 10 years?	YES NO				
7.2 If yes please provide details of any trips to Belize					
7.3 Have you travelled outside your country of residence	excluding Belize in the last 10 years?	YES NO			
7.4 Have you ever been refused a visa for any country in details.	cluding Belize? Please give dates and	YES NO			
7.5 Have you been granted previous visas to Belize? Plea	se give details	YES NO			
7.6 Have you been refused entry on arrival to Belize in the last 10 years?					
7.7 Have you ever been deported, removed or otherwise required to leave any country, including Belize in the last 10 years?					
7.8 Do you have any criminal convictions in any country including Belize?					
7.9 Have you ever been charged in any country with a country been tried in court?	YES NO				
7.10 In times of either peace or war have you ever been in war crimes, crimes against humanity or genocide?	YES NO				
7.11 Have you ever been involved in supported or encou	YES NO				
7.12 Have you ever been a member of or given support concerned in terrorism?	YES NO				
7.13 Have you ever, by any means or medium, expresse violence or that may encourage others to terrorist acts or	YES NO				
7.14 Have you engaged in any other activities that migh a person of good character?	YES NO				
8. TRAVELERS UNDER THE AGE OF (18) EIGHTEEN YEARS					
8.1 Please provide full details about your parents or guar	dians in your home country				
8.2 Name					
8.3 Address					
8.4 Telephone Number ()	8.5 Email Address				

8.6 Relationship					
8.7 Will you be travelling	to Belize alone?	YES 🗌	NO 🗆		
8.8 If accompanied, plea exact relationship to them		o adults who	will accompany you including their pas	ssport numbers and y	our
8. 9 Is the address you vaddress?	8. 9 Is the address you will be staying at a private address?				
8.10 Please provide full of	details about the person you will b	be staying w	ith		
8.11 Name					
8.12 Address					
8.13 Nationality					
8.14 Relationship					
8.15 How will you stay w	vith this person?	YES 🗌	NO 🗆		
9. YOUR TRIP					
9.1 What type of visa are	e you applying for?		SINGLE MULTIPLE		
9.2 How long do you inte	end to remain in Belize?				
9.3 What is the purpose of your visit to Belize?					
9.4 Please give full address and telephone number of all the places where you will be staying during your visit in Belize.					
9.5 If you are staying at a private address please give the name and exact relationship of the person(s) you will be staying with.					
				Photo	
SIGNATURE OF APPL	LICANT/GUARDIAN		DATE		

FOR OFFICIAL USE ONLY	
	0.15 5555505
	OUR REFERNCE:
Supporting Documents (kindly list all supporting documents accompanying application)	
RECOMMENDATIONS	
DIRECTOR IMMIGRATION AND NATIONALITY DEPARTMENT	DATE