(DHA–1738) **Form 8**

DEPARTMENT OF HOME AFFAIRS

REPUBLIC OF SOUTH AFRICA

APPLICATION FOR VISA TO TEMPORARILY SOJOURN IN THE REPUBLIC

[Section 10(2)*(c)* to *(k)*; Regulation 9(1)]

CATEGORY OF PERMIT BEING APPLIED FOR			
Visitor's visa		Exchange Visa	
Study Visa (> 3 months)		Business Visa	
Treaty Visa		Work Visa: Critical Skills	
Relative's Visa		Work Visa: General	
Medical Treatment Visa		Work Visa: Intra-company transfer	
Retired Person's Visa		Corporate Worker Certificate	

Biometric
(Attach Fingerprint Form, with Photograph)

FOR OFFICIAL USE ONLY		
Office of application:	BLOK:	Track & Trace Ref No
Date received:	Date forwarded to Head Office:	
Application quality checked by/on:	Date received at Head Office	Remarks:
Passport seen/returned by/on:	Decision and date:	
Fee: Currency and amount		
Fee received by/on: Receipt no:		
Conditions of permit / Reason for refusal		

1. PERSONAL DETAILS

Title:	Mr	Ms	Other (specify)	
Surname/Family name:				Given names:
Maiden name:				Stage name:
Previous/alternative name(s)/aliases, including details:				
Date of birth: Year..... Month..... Day.....				
Place of birth: Town/City:				Country:

Marital status:	Never married		Separated		Legally recognised spousal relationship	
	Married		Widowed			
	Divorced		Customary union			

If separated state:

Whether divorce proceedings have been instituted and when final decree is expected

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If divorced, provide:

Date of divorce: .....

Divorce order must be attached.

If party to a spousal relationship with a citizen or permanent resident, a certified copy of the marriage certificate or a notarial agreement, as well as the requisite affidavit, must be attached.

2. CITIZENSHIP DETAILS

Present country of citizenship:
If acquired other than by birth, date and conditions under which acquired: ....
Do you hold any other citizenship? Yes ☐ No ☐ If so, of which country? (provide details..... .....

3. PASSPORT DETAILS

Passport number:	Country of issue:
Date of issue:...../...../.....	Expiry date:...../...../.....
If you have any other document required by your government, provide details: Type of document:..... Number:..... Expiry date:...../...../.....	

4. ADDRESSES

Residential address: .... Postal code.....	Postal address: .... Postal code.....
Country of usual residence if other than country of origin or above address:	
Telephone No.: Work: (incl. *area code*) ..... Home: (incl. area code) ..... Cellphone number (if available): ..... Email address (if available):	

Other addresses where you have lived during the last ten years other than your current address:

Address:	Period:	Country:

Do you hold the right of re-entry into your country of origin and/or country of residence if this differs? Yes ☐ No ☐

If no, specify period and present status.....

Have you ever applied for asylum or refugee status in SA or any other country?

Yes ☐ No ☐ If yes, specify the country.....

Contact person:

Relationship: Friend		Business Associate		Relative		Other	

Name: .....

Address: .....

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Telephone No.: Work: (incl. area code) . ..... Home: (incl. area code) .....

Cellphone number (if available): .....

Email address (if available): .....

Details regarding relatives and/or friends in the Republic, if any.			
Name	Address	Relationship	Identity No

5. INTENTIONS/PROPOSED DURATION OF STAY IN THE REPUBLIC

Proposed date and place of departure for the Republic:			/ /								
Anticipated date and place of arrival in the Republic:			/ /								
Travelling by: Air		Road			Rail		Sea		Carrier		
What is your intended duration of stay in the Republic:											
Days/weeks/months/or		Years		Intended date of departure		/ /					

Outline your proposed activities whilst in the Republic:

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6. MAINTENANCE/DEPORTATION

State what funds you have available to maintain yourself during your stay in the Republic and whether you have a return ticket or other arrangements made for maintenance and return passage:

Available funds (foreign currency): Type:..... Amount: .....

South African Rand equivalent: ..... *(attach bank statement as proof of funds held).*

Valid return or onward ticket no: Expiry date: / /

Other: .....

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7. PARTICULARS OF ANY FAMILY/DEPENDANTS ACCOMPANYING YOU *(attach page if space is not enough)*:

Full names	Date of birth	Relationship	Passport No.	Expiry date	Nationality	Occupation

If your spouse and/or other dependants are not accompanying you, do they intend to enter the country at a later stage?

Yes ☐ On (date) / /

No ☐ Details/reason(s):

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Have you ever been refused entry into or deported from the Republic? If so, please provide details: .....

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8. SECURITY/HEALTH QUESTIONNAIRE

Have you or any of your dependants accompanying you ever been convicted of any crime in any country?	☐ Yes	☐ No
Is a criminal/civil case pending against you or any of your dependants accompanying you in any country?	☐ Yes	☐ No
Are you or any of your dependants suffering from tuberculosis, any other infectious or contagious disease or any mental or physical deficiency?	☐ Yes	☐ No
Are you an unrehabilitated insolvent?	☐ Yes	☐ No
Have you ever been judicially declared incompetent?	☐ Yes	☐ No
Are you a member of or adherent to an association or organisation advocating the practice of social violence, or racial hatred?	☐ Yes	☐ No

Have you ever been declared undesirable from the Republic?	
☐ Yes	☐ No

Furnish full particulars if the reply to any of these questions is in the affirmative:

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9. ANY ADDITIONAL INFORMATION YOU WISH TO BRING TO THE DEPARTMENT'S ATTENTION:

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10. DECLARATION BY APPLICANT

I acknowledge that I understand the contents and implications of this application and solemnly declare that the above particulars given by me as well as all particulars in the attached supporting documentation are true and correct.

Signature of applicant Date