

AMBASSADE DE LA REPUBLIQUE DU MALI EN INDE

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VISA APPLICATION FORM

TRANSIT OR STAY IN THE REPUBLIC OF MALI

121111111111111111111111111111111111111		PHOTO
Name (in capitals):		
Maiden name :		• • • •
First name:		
Date and place of birth:		
Nationality 1. originally:		
2. current:		
Occupation:		
Adress:		
Sex:		Number of children :
☐ Male ☐ Female	☐ Married ☐ Single	
Type of passport :	Passeport N°:	
☐ Ordinary	Issued:	
□ Service	Valid until:	
☐ Diplomatic	Place of issue:	
•	Authority that issued the passport:	
☐ Other (specify) :	•••••	• • • • • • • • • • • • • • • • • • • •
Port of entry in Mali:	Nature of visa :	Entries :
Date of trip:		
Mean of transport:	☐ Transit ☐ Short stay	-
•	Duration sought/jours	☐ Multiple
Date, places and length of the previous residences in Mali:		
Purpose of the trip: Official Business Tourism		
□ Others (specify) :		
Name - address and tél. : Host/ Family/Company/Hotel in Mali :		
I pledge to accept no paid employment or 'au pair' during my stay in Mali.		
I agree □ I do not □		
My signature engages my responsibility as well as my family and we accept the		
consequences dictated by the law in case of false declaration.		
At le20		
(Signature)		