



Visa Application for Aruba

This application form is free of charge

TYPE OR PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM

1. SURNAME(S) as stated in passport		SPACE FOR USE BY EMBASSY / CONSULATE ONLY Date filing: File processed by: Supporting documents: <input type="checkbox"/> Valid passport <input type="checkbox"/> Financial means <input type="checkbox"/> Invitation <input type="checkbox"/> Means of transportation <input type="checkbox"/> Health/Travel insurance <input type="checkbox"/> Other :
2. GIVEN NAME(S) as stated in passport		
3. OTHER SURNAME(S) (at birth, etc.)		
4. DATE OF BIRTH (year-month-day)	5. IDENTIFICATION NUMBER	
6. PLACE AND COUNTRY OF BIRTH		
7. CURRENT NATIONALITY	8. ORIGINAL NATIONALITY (at birth)	
9. SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	10. MARITAL STATUS : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other	
11. FATHER'S NAME	12. MOTHER'S NAME	
13. Type of passport: <input type="checkbox"/> National passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Travel document (1951 Convention) <input type="checkbox"/> Alien's passport <input type="checkbox"/> Seaman's passport <input type="checkbox"/> Other travel document (please specify):		
14. Passport Number	15. Issued by	
16. Date of issue	17. Valid until	
18. If you reside in a country other than your country of origin, do you have permission to return to that country? <input type="checkbox"/> No <input type="checkbox"/> Yes, (permit number and validity)		
19. Present occupation		
20. Name, address and telephone number of employer. For students, name and address of institution.		
21. Visa : <input type="checkbox"/> Individual <input type="checkbox"/> Collective		Visa : <input type="checkbox"/> Refused <input type="checkbox"/> Granted
22. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Multiple entries		Characteristics of Visa : <input type="checkbox"/> B <input type="checkbox"/> C
23. Duration of stay: _____ days		Number of entries : <input type="checkbox"/> 1 <input type="checkbox"/> Multiple
24. Other visas (issued during the past three years) and their period of validity		Valid from To
25. In the case of transit, do you have a valid ticket and the necessary documentation, to enter the country of final destination? <input type="checkbox"/> No <input type="checkbox"/> Yes ,which and valid until: _____ Issuing authority: _____		
26. Previous visits/stays to/in Aruba		

27. Purpose of your trip <input type="checkbox"/> Tourism <input type="checkbox"/> Business <input type="checkbox"/> Visit to Family <input type="checkbox"/> Cultural/Sports <input type="checkbox"/> Medical reasons <input type="checkbox"/> Other (please specify):		FOR EMBASSY / CONSULATE USE ONLY
28. Date of arrival	29. Date of departure	
30. Means of transportation		
31. Name of host or host company in Aruba. If not applicable, state name of hotel or temporary address in Aruba		
Name	Telephone and telefax	
Complete address	e-mail address	
32. Who pays for your trip and maintenance during your stay? <input type="checkbox"/> Applicant <input type="checkbox"/> Guarantor <input type="checkbox"/> Host company.		
33. Means of support during your stay <input type="checkbox"/> Cash <input type="checkbox"/> Travellers' cheques <input type="checkbox"/> Credit cards <input type="checkbox"/> Other: <input type="checkbox"/> Travel and/or health insurance. Valid until:		
34. Spouse's name	35. Spouse's name at birth	
36. Spouse's given name	37. Spouse's date of birth	
39. Children (Applications <u>must</u> be submitted separately for each passport)		
Name	Given name	Date of birth
1
2
3
40. Personal data of the Aruba citizen you depend on.		
Name	Given name	
Family relationship :		
41. I declare I am aware of and consent to the following: the personal data stated on this visa application form will be supplied to the competent authorities of Aruba or, if necessary, be processed by them for the purpose of a decision on my visa application. Such data may be fed into, and stored in, databases accessible to the competent authorities in Aruba. At my express request, the consular authority processing my application will inform me of the manner in which I may exercise my right to verify these data and have them altered or deleted, in particular, if they are inaccurate, in accordance with the national law of Aruba. I declare that to my knowledge all data supplied by me are correct and complete. I am aware that any false statements will lead to my application being rejected or to the withdrawal of a visa already granted and may also render me liable to prosecution under the law of Aruba. I undertake to leave Aruba upon expiry of the visa, if granted. I have been informed that possession of a visa is only one of the conditions for entry into Aruba. The fact that a visa has been granted to me does not automatically mean I will be entitled to compensation if I am refused entry into Aruba. Upon entry into Aruba, it will be verified again whether the conditions for entry/admission have been met.		
42. Applicant's home address		43. Telephone number
44. Place and date	45. Signature (for minors, signature of custodian/guardian)	