



République d'Haiti

Application for Tourist Visa

Date:

Name (Last, First) _____ Nationality _____

Address _____ Passport No. _____

City _____ Expiration Date _____

State _____ Zip Code _____ Telephone _____

Height _____ Weight _____

Eye Color _____ Hair Color _____ Distinguishing Marks _____

Profession

Employer's Name

Employer's Address

City

State _____ Zip Code _____ Telephone _____

Photo Frame

Name of Hotel or Residence while in Haiti _____ Applicant's Signature _____

Address

City _____

Registration No. (for official use only)