

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 passpo	SPACE FOR USE BY			
	EMBASSY / CONSULATE			
	ONLY			
2. GIVEN NAME(S) as stated in pa	Date filing:			
3. OTHER SURNAME(S) (at birth	ote)			4
5. OTHER SORVAME(5) (at bit in	, ()			
4. DATE OF BIRTH (year-month-o	dav)	5. IDENTIFICATION N	File processed by:	
	• /			
6. PLACE AND COUNTRY OF BI				
				Supporting documents:
7. CURRENT NATIONALITY	8. OF	8. ORIGINAL NATIONALITY (at birth)		 Valid passport Financial means
9. SEX	10 N	10. MARITAL STATUS :		
\square Male \square Female			Means of	
		□ Single □ Married □ Separated □ Divorced □ Widow(er) □ Other		transportation
				Health/Travel
				insurance Other :
11. FATHER'S NAME	12. N	MOTHER'S NAME		
11, FATHER 5 NAME				
13. Type of passport:				
□ National passport □ Diplon				
□ Alien's passport □ Seamar	ı's passport □ 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	n to return to that country?			
□ No □ Yes, (permit number and				
19. Present occupation				
	Visa :			
20. Name, address and telephone nu	RefusedGranted			
				Characteristics of Visa :
21. Visa :				
□ Individual □ Collective				□ C
				4
22. Number of entries requested	Number of entries :			
□ Single entry □ Multiple				
24. Other visas (issued during the p	□ 1 □ Multiple			
25. In the case of transit, do you hav destination?	Valid from To			
\square No \square Yes ,which and valid	10			
26. Previous visits/stays to/in Aruba	4			
20. 1 1 Crious visits/stays to/in 11 use	a			

Photo

27. Purpose of your trip □ Tourism □ Business □ Other (please specify):	FOR EMBASSY / CONSULATE USE ONLY					
28. Date of arrival	29. Dat	e of departure		I		
30. Means of transportation		e of acpartate		— I		
31. Name of host or host company in Aruba. If n	ot applicable, state	name of hotel or	temporary address in Aruba			
Name						
<u> </u>						
Complete address			e-mail address			
32. Who pays for your trip and maintenance due						
□ Applicant □ Guarantor □ Host comp						
33. Means of support during your stay						
\Box Cash \Box Travellers' cheques \Box Credit	cards D Other: .					
Travel and/or health insurance. Valid unti	1:					
	— — — — — — — — — —	~ •				
34. Spouse's name	35. Spouse's name at birth					
36. Spouse's given name	37. Spouse's date of	of birth	38. Spouse's place of birth			
39. Children (Applications <u>must</u> be submitted separate	arately for each pass	port)				
Name	Given name		Date of birth			
1						
2			••••			
3	<u></u>	<u></u>				
40. Personal data of the Aruba citizen you deper	nd on					
Name	iu on.		Given name	<u> </u>		
Family relationship :						
L						
41.						
I declare I am aware of and consent to the following						
the competent authorities of Aruba or, if necessary, Such data may be fed into, and stored in, databases	ation.					
At my express request, the consular authority proce	essing my application	will inform me of	the manner in which I may ex			
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						
I am aware that any false statements will lead to n	granted					
and may also render me liable to prosecution under						
I undertake to leave Aruba upon expiry of the visa, I have been informed that possession of a visa is o	as been					
granted to me does not automatically mean I will b	e entitled to compens	sation if I am refus	ed entry into Aruba. Upon ent			
Aruba, it will be verified again whether the conditi 42. Applicant's home address	ions for entry/admiss	ion have been met	43. Telephone number			
			io. receptione number			
44. Place and date			for minors, signature of			
		custodian/guai	uiall <i>j</i>			