

CONSULATE GENERAL OF THE
REPUBLIC OF INDONESIA
CHICAGO, ILLINOIS, USA



APPLICATION FOR DIPLOMATIC / OFFICIAL VISA TO INDONESIA

TO BE FILLED IN DUPLICATE

1. Name (in full) _____
2. Place/date of birth _____ / ____/____
3. Occupation _____
4. Nationality _____
5. Type of passport *) : Diplomatic Official Laissez-Passer (United Nation)
6. Passport No. _____
7. Date of Issue ____/____/____
8. Passport valid until ____/____/____
9. Purpose of traveling to Indonesia _____
10. Have you applied for a visa which at present is being processed? _____
11. If in transit, state country to which proceeding _____
12. Length of stay in Indonesia _____
13. Reference in Indonesia _____
14. Address in Indonesia _____
15. Home address (phone number if any) _____
16. Date ____/____/____ Signature _____

PLEASE DO NOT WRITE ON THIS SPACE

Visa No.: _____
Tanggal: _____
Lama diberikan: _____

*) Check one