



PHOTO

Visa Application Form

01-Full Name (as per passport) First Name Middle / Father's Name Last Name			02-Mother's Full Name
03- Place of Birth	04- Date of Birth Day Month Year	05- Sex Male Female <input type="checkbox"/> <input type="checkbox"/>	06- Occupation
07- Full Address in Nigeria		08-Email Address	09-Phone No.
10- Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	11- If married, Provide Spouse Name	12- Present Nationality	13-Nationality of Origin
14- Passport Number	15-Issuing Country	16- Date of Issue Day Month Year	17-Expiration Date Day Month Year
18-Type of Travel Document <input type="checkbox"/> Ordinary Passport <input type="checkbox"/> Diplomatic Passport <input type="checkbox"/> Official Passport <input type="checkbox"/> Special Passport <input type="checkbox"/> Travel Document for Palestinian Refugees	19-Purpose of Trip <input type="checkbox"/> Business <input type="checkbox"/> Family Visit <input type="checkbox"/> Education <input type="checkbox"/> Official <input type="checkbox"/> Tourism <input type="checkbox"/> Other (please specify)	20- Have you ever been to Lebanon? Yes No <input type="checkbox"/> <input type="checkbox"/>	21- If yes, provide the date of your most recent trip to Lebanon
22- Visa Duration Single Entry (\$88/pers) <input type="checkbox"/> 1 Month <input type="checkbox"/> 3 Months Double Entry (\$125/pers) <input type="checkbox"/> 6 Months Multiple Entry (\$175/pers) <input type="checkbox"/> 6 Months		23- Address in Lebanon where you will be staying: <input type="checkbox"/> Hotel <input type="checkbox"/> Friend <input type="checkbox"/> Family <input type="checkbox"/> Other	

I declare that the above information is correct and I assume full responsibility for any false declaration. I acknowledge that this visa is rendered invalid if any **Israeli** visa or seal is stamped on my passport.

Date: / /

Signature:

PLEASE DO NOT WRITE BELOW THIS LINE- FOR ISSUING OFFICE ONLY

Visa No.	Type of Visa	Date of Issue Day Month Year	Date of Expiry Day Month Year
No of Entries	Fees	Receipt No.	Responsible signature