



VIP SERVICES

2012 Louisiana Street
Houston, Texas 77002
713-659-8472 1-800-856-8472 Fax 713-659-3767
Website: www.vippassports.com Email: info@vippassports.com

WORK ORDER REQUEST FORM

(RETURN THIS FORM WITH EACH REQUEST)

BILLING INFORMATION:

CONTACT: _____
COMPANY: _____
ADDRESS: _____

PHONE: _____
FAX: _____
EMAIL: _____

RETURN DOCUMENTS TO:

CONTACT: _____
COMPANY: _____
ADDRESS: _____

PHONE: _____
FAX: _____
EMAIL: _____

BILLING INSTRUCTIONS:

AMOUNT ENCLOSED FOR DEPOSIT: _____

YOUR COMPANY P.O. OR REF#: _____

CREDIT CARD INFORMATION:

TYPE OF CARD: _____
CARD #: _____
EXPIRATION DATE: _____

AUTHORIZED AMOUNT TO CHARGE MY CREDIT CARD: US\$ _____

SIGNATURE OF CARD HOLDER REQUIRED: _____

VISA PROCESSING
LIST COUNTRIES

AND
AND

CONSULATE FEES:
CONSULATE FEES:

_____	-	\$ _____
_____	-	\$ _____
_____	-	\$ _____

TRAVELERS NAME: _____

DATE OF USA DEPARTURE: _____

DATE YOU NEED PASSPORT: _____

SPECIAL INSTRUCTIONS: _____

HOW DID YOU HEAR ABOUT VIP?

REPEAT CUSTOMER__ INTERNET__ REFERRED__ BY _____ WALK-IN _____



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CAMEROON

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

TOURIST VISA:

- 1.) PASSPORT (MINIMUM OF 6 MONTHS VALIDITY)
- 2.) (2) TWO PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) (2) TWO COMPLETED APPLICATIONS
- 4.) A COPY OF YOUR CONFIRMED TRAVEL ITINERARY OR AIRLINE TICKETS
- 5.) A COPY OF YOUR CURRENT BANK STATEMENT, SHOWING AT LEAST \$100.00 PER DAY OF STAY
- 6.) COPY OF YOUR GREEN CARD OR THE ORIGINAL I-94 AND USA VISA
- 7.) A COPY OF THE VACCINATION CERTIFICATE SHOWING PROOF OF YELLOW FEVER IMMUNIZATION
- 8.) CONSULATE FEE:
\$141.00 - SINGLE ENTRY
\$141.00 - SINGLE OR MULTIPLE ENTRY VALID FOR A STAY UP TO 90 DAYS AS INDICATED ON THE APPLICATION

BUSINESS VISA:

- 1.) PASSPORT (MINIMUM OF 6 MONTHS VALIDITY)
- 2.) (2) TWO PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) (2) TWO COMPLETED APPLICATIONS
- 4.) A COMPANY LETTER OF GUARANTEE
- 5.) A COPY OF YOUR CONFIRMED TRAVEL ITINERARY OR AIRLINE TICKETS
- 6.) A COPY OF YOUR GREEN CARD OR THE ORIGINAL I-94 AND USA VISA
- 7.) A COPY OF THE VACCINATION CERTIFICATE SHOWING PROOF OF YELLOW FEVER IMMUNIZATION
- 8.) CONSULATE FEE:
\$141.00 - SINGLE ENTRY
\$141.00 - (3) THREE MONTH MULTIPLE ENTRY VISA
\$275.00 - (6) SIX MONTH MULTIPLE ENTRY VISA

CONTINUED...



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VALIDITY: TOURIST VISAS ARE NORMALLY VALID FOR SINGLE OR MULTIPLE ENTRIES, TO BE USED WITHIN (90) NINETY DAYS FROM THE DATE OF ISSUE. BUSINESS VISAS ARE NORMALLY ISSUED FOR MULTIPLE ENTRIES VALID FOR UP TO 6 MONTHS AS REQUESTED IN YOUR COMPANY AND INVITATION LETTER. YOU MUST MAKE YOUR 1ST ENTRY INTO CAMEROON WITHIN 90 DAYS FROM THE DAY THE VISA WAS ISSUED. THE VALIDITY TIME OF THE VISA AND THE LENGTH OF STAY IS DETERMINED ON A CASE BY CASE BASIS BY THE ISSUING VISA OFFICER. NOT ALWAYS WILL THE EMBASSY ISSUE A MULTIPLE ENTRY VISA.

SPECIAL NOTES: IF WE APPLY FOR A 6 MONTH MULTIPLE ENTRY VISA AND THE CONSULATE ONLY ISSUES A SINGLE ENTRY VISA OR A 90 DAY VISA THE CONSULATE WILL NORMALLY MAIL A REFUND TO THE APPLICANT AT THE ADDRESS LISTED ON THE APPLICATION.

REVISED: 6-26-2011 (SDL)



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EXAMPLE OF A COMPANY LETTER OF GUARANTEE

DATE: _____

EMBASSY/CONSULATE OF: _____

GENTLEMEN:

MR. / MRS. (TRAVELER) IS ONE OF OUR EMPLOYEES WHO IS
ENGAGED AS (POSITION) FOR (COMPANY NAME). MR. / MRS.
(TRAVELER) PLANS TO VISIT (CITY) FOR THE PURPOSE OF (DETAILED
EXPLANATION OF TRIP) WITH (COMPANY TO BE VISITED).

MR. / MRS. (TRAVELER) WILL BE DEPARTING THE UNITED STATES ON
(DATE) AND WILL BE STAYING FOR (LENGTH OF TRIP). OUR COMPANY,
(EMPLOYER), WILL GUARANTEE MR. / MRS. (TRAVELER) MAINTENANCE
AND WILL BE RESPONSIBLE FOR HIS / HER WELFARE WHILE IN YOUR
COUNTRY. HE / SHE IS IN POSSESSION OF SUFFICIENT FUNDS FOR HIS / HER
STAY AND HAS PREPAID TRANSPORTATION TO RETURN TO THE UNITED
STATES.

WE WOULD BE VERY APPRECIATIVE IF YOU WOULD ISSUE MR. / MRS.
(TRAVELER) THE APPROPRIATE (SINGLE OR MULTIPLE) ENTRY BUSINESS VISA
AT YOUR EARLIEST CONVENIENCE.

THANK YOU,

(SUPERVISORS SIGNATURE)

PLEASE BE SURE THAT THE PERSON WHO AUTHORIZED YOUR TRIP SIGNS THIS
LETTER. THE TRAVELER SHOULD NOT SIGN THIS LETTER.
DO NOT ATTENTION THIS LETTER TO VIP SERVICES!

EMBASSY OF THE REPUBLIC
OF CAMEROON

Tél. : (202) 265-8790

Fax : (202) 387-3826

Email: cs@cameroonembassyusa.org



AMBASSADE DE LA REPUBLIQUE
DU CAMEROUN

1700 Wisconsin Avenue, N.W.

Washington, DC 20007

www.cameroonembassyusa.org

DEMANDE DE VISA / VISA APPLICATION

(ECRIRE EN LETTRES MAJUSCULES SEULEMENT / WRITE IN CAPITAL LETTERS ONLY)

Etat-Civil du voyageur / Civil Status of the traveler

Noms : _____ Prénoms : _____

Surname Given Names

Née / Maiden Name* : _____ Date de Naissance : _____

Date of Birth Jour/Day Mois/Month Année/Year

Lieu de naissance / Place of Birth

Ville / City or Town : _____ Pays / Country : _____

Nationalité / Nationality

Origine / Origin: _____ Actuelle/ Current: _____

Naturalisé(e) le* : _____ *Si cela s'applique
Naturalized on If applicable*

Photographie
(Agrafer ou coller la photo)

2 inches X 2 inches

Photograph
(Staple or glue the photo)

Informations sur le passeport du voyageur / Traveler's Passport Information

Passeport N° : _____ Pays ou Autorité Emettrice : _____

Passport N° Issuing Country or Authority

Date de délivrance : _____ Lieu de délivrance : _____ Date d'expiration _____

Date of issue Place of issue Date of expiration

Informations sur le voyageur / Information about the traveler

Noms des parents / Parents' names :

Père/Father: _____ Mère/Mother: _____

Situation familiale / Family status : Célibataire / Single Marié(e) / Married^(a) Pas Marié(e) mais vivant en couple^(a)
 Divorcé(e) / Divorced Veuf (ve) / Widow(er) *Unmarried but living with a partner*

^(a) Nom, sexe et numéro de téléphone de l'époux (se) ou du (de la) partenaire

Provide spouse's or partners NAME, SEX, and PHONE NUMBER:

Enfants / Children: - Nombre / Number: _____ || - Age / Age: 0 - 5 5 - 10 10 - 15 Plus de 15 / Over 15

Profession: _____ **Employeur:** _____ **Situation militaire:** _____

Occupation Employer Military status

Adresse et contact du voyageur / Traveler's address and contact information

Adresse/Address : Rue/Street address: _____ Apt. N° _____

Ville/City: _____ Etat/State: _____ Zip Code _____ Pays/Country _____

Tél./Phone: Cell: (_____) _____ Autre #/Other #: (_____) _____ E-mail: _____

Personne à contacter en cas d'urgence / Emergency contact person: Nom / Name _____

Numéro de Tel. / Phone Number (_____) _____ Lien/Relationship _____

Nature et durée du visa sollicité / Type and duration of visa requested:

Séjour De / Stay Of _____ Jours / Days (ou bien cocher la case ci-dessous qui s'applique / or check the corresponding box below)

Un Mois / One Month Trois Mois / Three Months Six Mois / Six Months Autre / Other _____

Entrées / Entries : Unique / Single Multiple / Multiple

Motif(s) du voyage / Reason(s) for traveling: (cocher les cases qui s'appliquent / check all that apply)

Affaires / Business Etudes / Studies Famille / Family Officiel / Official Visite / Visit

Tourisme / Tourism Transit / Transit Autre / Other _____

Réservé au Service Consulaire / Reserved to the Consular Service

VISA N° _____

Plans de voyage / Travel plans :

Date et lieu de départ des Etats-Unis / *Date and place of departure from the USA:* _____

Date et lieu d'entrée au Cameroun / *Date and place of entry in Cameroon:* _____

Date et lieu de départ du Cameroun / *Date and place of departure from Cameroon :* _____

Où comptez-vous vous rendre en sortant du Cameroun ? _____

Where do you intend to go when leaving Cameroon?

Avez-vous déjà visité le Cameroun? Si oui, A quelle(s) date(s) : _____

Have you ever visited Cameroon? If yes, When? _____

Avez-vous déjà habité le Cameroun pendant plus de trois (03) mois sans interruption ? OUI/YES^(b) NON/NO

Have you ever made an uninterrupted stay of more than three (03) months in Cameroon?

^(b) Précisez à quelles dates : _____

If yes, specify the dates _____

Attaches familiales au Cameroun (adresses exactes) : _____

Relatives in Cameroon (exact addresses) _____

Références au Cameroun (nom et adresse exacte) : _____

References in Cameroon (name and exact address) _____

Indiquez les noms et adresses des commerçants/industriels que vous désirez rencontrer s'il s'agit d'un voyage d'affaires

Give names and addresses of businessmen/manufacturers you wish to meet if this is a business trip: _____

Comptez-vous installer au Cameroun un commerce ou une industrie ? OUI/YES^(c) NON/NO

Do you intend to establish a business in Cameroon?

^(c) Veuillez Spécifier/Expliquer : _____

Please specify/explain _____

Indiquez vos adresses exactes au Cameroun pendant votre séjour : _____

Specify your exact addresses during your stay in Cameroon _____

Vous engagez-vous à n'accepter aucun emploi rémunéré ou au pair durant votre séjour au Cameroun, à ne pas chercher à vous y installer définitivement et à quitter le territoire à l'expiration du visa qui vous sera éventuellement accordé ?

Do you agree not to accept any employment, either at a salary or for room and board during your stay in Cameroon, not to seek to remain in Cameroon permanently and to leave the Cameroonian territory at the expiration of the visa that may be granted to you?

OUI/YES NON/NO

. Ma signature engage ma responsabilité et m'expose, en sus de poursuites prévues par la loi en cas de fausse déclaration, à me voir refuser tout visa à l'avenir.

. My signature renders me responsible and exposes me, in case of any false statements, in addition to any penalties imposed by law, to be refused any Cameroon visa in the future.

Signature (*Must be that of the requester him/herself*)
(Doit être celle de la personne requérante elle-même)

Date