



VIP PASSPORT SERVICES, INC.

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: _____
CITY/ST: _____
PHONE: _____
CELL: _____
FAX: _____
EMAIL: _____

RETURN DOCUMENTS TO:

CONTACT: _____
COMPANY: _____
ADDRESS: _____
CITY/ST: _____
PHONE: _____
CELL: _____
FAX: _____
EMAIL: _____

CREDIT CARD INFORMATION:

CARD#: _____
EXP. DATE: _____ CVV#: _____

**SIGNATURE OF CARD HOLDER
REQUIRED:** _____

BILLING INSTRUCTIONS:

YOUR P.O. OR REF#: _____

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

TRAVELERS NAME: _____

DATE OF USA DEPARTURE: _____

DATE OF BIRTH: _____

DATE YOU NEED PASSPORT: _____

VIP RESERVATION/FILE LOCATOR NUMBER: _____

SPECIAL INSTRUCTIONS: _____

HOW DID YOU HEAR ABOUT VIP?

REPEAT CUSTOMER__ INTERNET__ REFERRED__ BY_____ WALK-IN_____



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DJIBOUTI

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

TOURIST VISA:

- 1.) SIGNED U.S. PASSPORT (MINIMUM OF 6 MONTHS REMAINING VALIDITY WITH AT LEAST 1 BLANK VISA PAGE)
- 2.) (1) ONE PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) (1) ONE COMPLETED APPLICATION
- 4.) COPY OF THE TRAVEL ITINERARY
- 5.) CONSULATE FEE: \$60.00 30 DAY SINGLE/MULTIPLE
\$90.00 90 DAY SINGLE/MULTIPLE
\$120.00 180 DAY SINGLE/MULTIPLE
- 6.) YELLOW FEVER VACINATION (PLEASE SEND A COPY OF THE INTERNATIONAL HEALTH CERTIFICATE SHOWING INOCULATIONS FOR YELLOW FEVER IF TRAVELING FROM AN INFECTED AREA ([CLICK HERE](#) TO SEE IF THIS APPLIES TO YOU) .

VALIDITY: THE VISA IS NORMALLY ISSUED AND VALID EQUAL TO THE AMOUNT OF TIME AS TO THE AMOUNT OF CONSULATE FEES PAID AND WILL ALLOW FOR A STAY UP TO 30 DAYS ON EACH ENTRY. THE NUMBER OF ENTRIES AND THE LENGTH OF STAY WILL BE DETERMINED BY THE VISA OFFICER AND WILL BE LISTED ON THE VISA.

REVISED: 06-15-2017 (SDL)



EMBASSY OF THE REPUBLIC OF DJIBOUTI

PHOTOGRAPH
(2"X2")

VISA APPLICATION

ATTENTION

Fill out headings using CAPITAL LETTERS.

Your application shall not be processed in case of error or omission.

VISITORS ARE URGED TO OBTAIN PROPER VISAS PRIOR TO DEPARTURE

1. NAME: FIRST NAME			MIDDLE NAME			LAST NAME / SURNAME		
2. DATE & PLACE OF BIRTH: DATE/ MONTH/YEAR			CITY/ TOWN			COUNTRY		
3. SEX: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>			4. PERSONAL STATUS: MARRIED <input type="checkbox"/> NOT MARRIED <input type="checkbox"/>					
5. NATIONALITY: CURRENT NATIONALITY (IES):				FORMER OR BIRTH NATIONALITY:				
6. TYPE OF PASSPORT OR TRAVEL DOCUMENT: DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> TRAVEL DOCUMENT <input type="checkbox"/> OTHER <input type="checkbox"/>			PASSPORT NO. OR TRAVEL DOCUMENT NO.			NAME OF ISSUING COUNTRY OR AUTHORITY:		
			DATE OF ISSUE:			DATE OF EXPIRATION:		
7. PERMANENT ADDRESS:								
8. TELEPHONE: OFFICE () -			HOME () -			MOBILE () -		
9. PROFESSION/ OCCUPATION:					10. EMPLOYER: (NAME/ ADDRESS/TEL.)			
11. ACCOMPANYING CHILDREN								
FIRST NAME			MIDDLE NAME			LAST NAME		

12. DATE(S) OF EARLIER VISIT TO DJIBOUTI	
13. PURPOSE OF TRIP: DIPLOMATIC <input type="checkbox"/> OFFICIAL <input type="checkbox"/> BUSINESS <input type="checkbox"/> TOURIST <input type="checkbox"/> TRANSIT <input type="checkbox"/> OTHER <input type="checkbox"/>	
14. DURATION OF STAY: FROM (DATE/ MONTH/YEAR) TO (DATE/ MONTH/YEAR)	15. VISA REQUESTED FOR; SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY <input type="checkbox"/>
16. MEANS OF SUPPORT DURING YOUR STAY IN DJIBOUTI (CASH/ TRAVELLER'S CHECK/ CREDIT CARDS ETC.)	17. SPONSER OR HOST IN DJIBOUTI (NAME/ ADDRESS/ TEL.)

DATE _____

SIGNATURE _____

FOR OFFICIAL USE ONLY		
DATE OF DELIVRANCE	NATURE OF VISA	NUMBER OF VISA
DURATION OF VISA	VALIDITY OF VISA FROM: _____ TO: _____	
NUMBER OF ENTRIES: SIMPLE <input type="radio"/> DOUBLE <input type="radio"/> MULTIPLE <input type="radio"/>	DECISION OF AUTHORITIES:	

VISA REQUIREMENTS FOR ALL VISA APPLICANTS

- A passport or travel document valid for at least 6 months
- 1 visa application form duly completed (front & back) with original signature
- 1 recent passport size color photograph
- A copy of a roundtrip ticket or the itinerary
- For diplomatic and official visa, an official letter is required
- For business visa, a company letter is required
- **Visa fees in US dollars (for all entrees): \$60.00 for 1 month, \$90.00 for 3 months and 120.00\$ for 6 months** payable to the Embassy of Djibouti with money order, company check or cash if applied in person. Credit card and personal check are **NOT** accepted. **NOTE:** For Canadian money orders & Co. checks, please add US\$2.00 for US bank processing fee.
- Yellow Fever Vaccination is required if traveling from an infected area.

FOR RETURNING PROCESSED PASSPORTS A self-addressed stamped envelope or a pre-paid and completed airway bill for next day delivery service (if applicable), credit card charges are NOT accepted.

Applications of potential visitors to Djibouti not residing in the United States & Canada must be accompanied by a note of request from their respective Embassies or Missions or must hold a valid US visa. Visa extension is possible in Djibouti on a case by case basis.

CONSULAR HOURS Monday through Friday between **10:00 a.m. - 4:00 p.m.** Passports may be collected after **2 Business Days.**

EMBASSY OF THE REPUBLIC OF DJIBOUTI
 1156-15th Street NW, Suite # 515, Washington, D.C.20005
 Tel:(202)331-0270 * Fax:(202)331-0302 * E- mail:djibouticonsular@gmail.com