



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#: _____

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

CREDIT CARD INFORMATION:

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

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: _____



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LAOS

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

TOURIST/VISIT VISA:

- 1.) U.S. PASSPORT (MINIMUM OF 1 YEAR VALIDITY)
- 2.) (3) THREE PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) (2) TWO COMPLETED APPLICATIONS
(APPLICATIONS CAN BE COPIED)
- 4.) IF YOU ARE VISITING RELATIVES OR FRIENDS
THEY MUST GO TO THE MINISTRY OF INTERIOR AND
APPLY FOR AN APPROVAL. ONCE A REQUEST HAS
BEEN APPROVED, THE MINISTRY OF FOREIGN AFFAIRS
WILL SEND A FAX TO THE LAOS EMBASSY TO ISSUE A
VISA ACCORDINGLY.
- 5.) IF YOU ARE TRAVELING AS A TOURIST YOU MUST
PROVIDE CONFIRMATION FROM A TOUR COMPANY IN LAOS
- 6.) A COPY OF YOUR TRAVEL ITINERARY
- 7.) CONSULATE FEE: \$50.00

BUSINESS VISA:

THE EMBASSY RECOMMENDS THAT YOU APPLY FOR A VISITOR
VISA AND ASK YOUR SPONSOR TO ARRANGE TO HAVE YOUR
VISA CONVERTED TO A BUSINESS VISA WHILE IN LAOS.

VALIDITY: VISAS ARE VALID FOR SINGLE ENTRY AND MUST BE USED
WITHIN 60 DAYS FROM THE DAY THE VISA IS ISSUED.

REVISED: 03-11-2007



ສາທາລະນະລັດ ປະຊາທິປະໄຕ ປະຊາຊົນລາວ
Lao People's Democratic Republic
ສັນຕິພາບ ເອກະລາດ ປະຊາທິປະໄຕ ເອກະພາບ ວັດທະນາຖາວອນ
Peace Independence Democracy Unity Prosperity

ສະຖານເອກອັກຄະລັດຖະທູດ
ແຫ່ງສປປລາວທີ່ວໍຊິງຕັນ ດີ.ຊີ

Embassy of the Lao PDR
2222 S Street, N.W.
Washington, DC 20008
Tel: (202) 667-0076
Fax: (202) 332-4923

ຄໍາຮ້ອງຂໍວິຊາ
APPLICATION FOR VISA

ຮູບ
PHOTOGRAPH
2" x 2"

ຊື່: ນາມສະກຸນ:
FIRST NAME (IN BLOCK LETTER) FAMILY NAME (IN BLOCK LETTER)
ວັນ, ເດືອນ, ປີເກີດ: ສະຖານທີ່ເກີດ:
DATE OF BIRTH PLACE OF BIRTH
ສັນຊາດ: ອາຊີບ:
NATIONALITY OCCUPATION
ຫນັງສືຜ່ານແດນຫນາຍເລກ: ອອກໃຫ້ທີ່:
PASSPORT No. PLACE OF ISSUE
ອອກໃຫ້ວັນທີ: ໃຊ້ໄດ້ເຖິງ:
DATE OF ISSUE EXPIRATION
ທີ່ຢູ່ປະຈຸບັນ: ໂທລະສັບ:
HOME ADDRESS TEL.

ລູກຕິດຕາມທີ່ໃຊ້ຫນັງສືຜ່ານແດນດຽວກັນ: 1. ຊື່ (NAME) ອາຍຸ (AGE)
CHILDREN TRAVELING WITH THE SAME PASSPORT 2. ຊື່ (NAME) ອາຍຸ (AGE)
3. ຊື່ (NAME) ອາຍຸ (AGE)

ເຫດຜົນຂອງການເດີນທາງ: ພາຫະນະການເດີນທາງ:
PURPOSE OF THE TRIP MEANS OF TRANSPORTATION
ວັນຈະເຖິງ ສປປ ລາວ: ກຳນົດຢູ່ ສປປ ລາວ: ວັນ
DATE OF ARRIVAL IN THE LAO PDR DURATION OF STAY IN THE LAO PDR DAYS
ດ່ານເຂົ້າເມືອງ:
PORT OF ENTRY

ຜູ້ຮັບປະກັນຢູ່ ສປປ ລາວ: ຊື່ (NAME): ໂທລະສັບ (TEL.):
REFERENCE IN THE LAO PDR ທີ່ຢູ່ (ADDRESS):

ຈຸດເດີນທາງຫຼັງຈາກການຢ້ຽມຢາມ ສປປ ລາວ:
NEXT DESTINATION AFTER YOUR VISIT TO THE LAO PDR

ວັນທີ: ລາຍເຊັນ:
DATE SIGNATURE

ຄໍາເໜັ້ນຂອງສະຖານທູດ (OFFICIAL USE ONLY)

ວິຊາເລກທີ: ລົງວັນທີ: