

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: vipinfo@vippassports.com



WORK ORDER REQUEST FORM

ELECTRONIC REQUESTS

TRAVELER INFO

TRAVELER NAME

TRAVELER DATE OF BIRTH

DATE OF U.S. DEPARTURE

DATE PASSPORT IS NEEDED

VIP FILE LOCATOR NUMBER

BILLING INFORMATION

CONTACT & COMPANY NAME

ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER

CELL NUMBER

FAX NUMBER

EMAIL

P.O. OR BILLING REF#:

RETURN INFORMATION

**PLEASE LIST THE EMAIL ADDRESS WHERE THE COMPLETED DOCUMENT IS TO BE SENT,
IF DIFFERENT FROM THE ONE LISTED ABOVE**

EMAIL FOR RETURN OF DOCUMENT:

METHOD OF PAYMENT

CREDIT CARD

CARD NUMBER

EXP. DATE

CVV CODE

SIGNATURE OF CARD HOLDER

AUTH. AMOUNT \$_____

MONEY ORDER

CASHIER'S CHECK

COMPANY CHECK

SPECIAL INSTRUCTIONS: _____

SPECIALIZING IN VISAS, PASSPORTS, DOCUMENT TRANSLATIONS & LEGALIZATIONS

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UGANDA E-VISA (BUSINESS OR TOURIST)

U.S. PASSPORT HOLDER

PLEASE SEND THE REQUIRED DOCUMENTS BELOW TO OUR OFFICE, VIA EITHER EMAIL OR COURIER/SHIPPING. ONCE PROCESSED AND COMPLETED, WE WILL SEND A CONFIRMATION EMAIL CONTAINING THE ELECTRONIC VISA TO THE EMAIL LISTED ON THE WORK ORDER.

- 1.) COPY OF VALID PASSPORT
 - MINIMUM OF 6 MONTHS VALIDITY
- 2.) ONE (1) COMPLETED APPLICATION FORM
- 3.) ONE COLOR PASSPORT-TYPE PHOTO
 - MUST BE A CLEAR, COLOR PHOTO ON A WHITE BACKGROUND
 - CAN BE EMAILED TO OUR OFFICE OR SENT WITH A PRINTOUT OF ALL OTHER REQUIREMENTS
- 4.) COMPANY LETTER OF GUARANTEE (BUSINESS VISITS ONLY)
- 5.) POLICE CLEARANCE LETTER (BUSINESS VISITS ONLY)
- 6.) COPY OF INTERNATIONAL HEALTH CERTIFICATE SHOWING VACCINATION FOR YELLOW FEVER
- 7.) COPIES OF LETTERS OF RECOMMENDATION FROM TWO (2) REFEREES IN UGANDA (BUSINESS VISITS ONLY)
- 8.) COPY OF LETTER OF INTENT STATING REASON FOR MULTIPLE ENTRY REQUESTS (MULTIPLE-ENTRY BUSINESS VISITS ONLY)
- 9.) COPY OF TRAVEL ITINERARY
 - MUST SHOW PORTS OF ENTRY INTO AND EXIT FROM OMAN
- 10.) CONSULATE FEES:

TYPE OF VISA	LENGTH OF VALIDITY	CONSULATE FEE
TOURIST (SINGLE ENTRY)	3 MONTHS	\$50.00
BUSINESS (MULTI ENTRY)	6 MONTHS	\$100.00
	12 MONTHS	\$100.00
	24 MONTHS	\$150.00

VALIDITY: THE FINAL DECISION AS TO THE LENGTH OF VALIDITY AND THE NUMBER ENTRIES IS MADE BY THE EMBASSY/CONSULATE ON A CASE-BY-CASE BASIS.

SPECIAL NOTES:

- DOCUMENTS CAN BE SENT TO OUR OFFICE EITHER ELECTRONICALLY (INFO@VIPPASSPORTS.COM) OR BY SHIPPING TO OUR OFFICE. IF THE DOCUMENTS ARE EMAILED, PLEASE BE SURE THE PHOTO IS IN .JPEG FORMAT AND ALL OTHER DOCUMENTS ARE IN .PDF FORMAT.
- IF YOU DO NOT QUALIFY FOR AN E-VISA (I.E. - REASON FOR TRAVEL IS FOR SOMETHING OTHER THAN BUSINESS OR TOURISM), PLEASE CONTACT OUR OFFICE FOR ADDITIONAL/ALTERNATE INSTRUCTION AND GUIDANCE ON APPLYING FOR A VISA.
- DUE TO INTERNATIONAL EXCHANGE RATES, CONSULATE FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

REVISED: 5-23-2018 (JENN)

Specializing in Visas, Passports, Document Legalization and Translations

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EXAMPLE OF A COMPANY LETTER OF GUARANTEE

DO NOT ATTENTION THIS LETTER TO VIP SERVICES!

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.



Passport
size photo
here.

UGANDA VISA APPLICATION FORM

The Permanent Mission of Uganda
336 East 45th
New York, NY 10017
Tel: +1(212)949-0110
Fax: +1(212)687-4517
Email: newyork.visa@mofa.co.ug ,
visa@ugandamissionunyny.net

This form must be fully completed in English using blue or black ink. Please attach one (1) passport size photograph.

Part 1 **General information**

Type of visa required: *Put a cross (x) in the relevant box.*

- Tourist Business Employment EAC Visa
Official Student Other

If other (Please Explain)

Validity of visa: *Put a cross (x) in the relevant box*

- Single Entry (3 months) Multiple Entry (6 Months) EAC (3 months multiple)

What is the purpose of your visit to Uganda?

How long will you stay in Uganda?

From

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

To

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Travel Dates:

What is your date of travel?

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Which date will you leave Uganda?

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Part 2

Personal Details

Given Names *(as shown in your passport)*

Family name *(as shown in your passport)*

Other names *(include all previous names used)*

Sex *(Put a cross (x) in the relevant box)*

Male

Female

**Current Occupation and
Employer's Contact address**

(Physical address, Phone and E-mail address)

Previous Occupation

(Physical address, Phone and E-mail address)

Marital Status *(Put a cross (x) in the relevant box)*

Single Married Divorced/Separated Widowed

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place of Birth

Country of Birth

Nationality

Part 3**Contact Details**

Give your U.S residential address

(Physical address, Phone and E-mail address)

Details of contact person, OR Hotel address and telephone Number in Uganda.

*(Physical address, Phone and E-mail address)***Part 4****Passport Information****Type of Passport***(Put a cross (x) in the relevant box.)*
 Diplomatic Official Ordinary Travel document
Current Passport Number**Place of issue****Issuing Authority****Date of issue**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Date of Expiry

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Part 5**Previous Applications**

Have you travelled to Uganda in the past 3 years?

Yes No *If 'Yes' please provide details in the box below.*

Date	
Destination	
Purpose	
Duration	

Part 5**Declaration**

The information I have given in this form is complete and true to the best of my knowledge and the attached photograph is a true likeness of me.

Signature

Date

--

D	D
---	---

M	M
---	---

Y	Y	Y	Y
---	---	---	---

PLEASE NOTE:

This process is not an automatic qualification to obtain a VISA. The consular office reserves the right to deny or issue the Visa after a thorough review of your submitted paperwork.

Part 7**Official Use Only**

Amount Paid (\$)		Money Order No.	
-------------------------	--	------------------------	--

Type of Visa issued

SINGLE (3 Months) MULTIPLE (6 Months) GRATIS DIPLOMATIC

VISA NUMBER	DATE OF ISSUE

Authorizing Officer									
Signature									
Date	<table border="1"> <tr> <td style="width: 30px; height: 30px; text-align: center;">D</td> <td style="width: 30px; height: 30px; text-align: center;">D</td> <td style="width: 30px; height: 30px; text-align: center;">M</td> <td style="width: 30px; height: 30px; text-align: center;">M</td> <td style="width: 30px; height: 30px; text-align: center;">Y</td> <td style="width: 30px; height: 30px; text-align: center;">Y</td> <td style="width: 30px; height: 30px; text-align: center;">Y</td> <td style="width: 30px; height: 30px; text-align: center;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		