



VIP PASSPORT SERVICES, INC.

2012 Louisiana Street
Houston, Texas 77002
713-659-8472

Website: www.vippassports.com Email: info@vippassports.com



WORK ORDER REQUEST FORM

TRAVELER INFO:	
TRAVELER NAME	
TRAVELER DATE OF BIRTH	
DATE OF U.S. DEPARTURE	
DATE PASSPORT IS NEEDED	
VIP FILE LOCATOR NUMBER	

DON'T FORGET

TO EMAIL YOUR DOCUMENTS TO OUR OFFICE FOR OUR COMPLIMENTARY PASSPORT/VISA PRE-CHECK!

BILLING INFORMATION (CHECK BOX IF SAME AS SHIPPING)

CONTACT & COMPANY NAME	
ADDRESS (STREET, CITY, STATE, ZIP)	
PHONE NUMBER	
CELL NUMBER	
EMAIL	
P.O. OR BILLING REF#:	

RETURN SHIPPING INFORMATION (CHECK BOX TO WAIVE SIGNATURE)

CONTACT & COMPANY NAME	
ADDRESS (STREET, CITY, STATE, ZIP)	
PHONE NUMBER	
CELL NUMBER	
EMAIL	

METHOD OF PAYMENT

<input type="checkbox"/> CREDIT CARD	CARD NUMBER	EXP. DATE	CVV CODE
SIGNATURE OF CARD HOLDER		AUTH. AMOUNT \$_____	
<input type="checkbox"/> MONEY ORDER	<input type="checkbox"/> CASHIER'S CHECK	<input type="checkbox"/> COMPANY CHECK	

SPECIAL INSTRUCTIONS: _____



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ALGERIA WORK VISA U.S. PASSPORT HOLDER

PLEASE FORWARD THIS SHEET AND ALL THE REQUIREMENTS TO THE ADDRESS LISTED ABOVE

PROCESSING FEES (PER APPLICANT)

VIP SERVICE FEE: (REGULAR PROCESS)	<u>\$150.00</u>
CONSULATE FEE: (SEE NEXT PAGE)	<u> </u>
MONEY ORDER:	<u>\$6.00</u>
OTHER FEES: _____	<u> </u>
ADD RETURN SHIPPING FEE:	<u> </u>
TOTAL: (NO PERSONAL CHECKS PLEASE)	<u> </u>

FEDEX LETTER RETURN SHIPPING FEES (SELECT ONE)	
<input type="checkbox"/> PRIORITY OVERNIGHT	\$65.00
<input type="checkbox"/> 2-DAY	\$57.50
<input type="checkbox"/> 3-DAY	\$47.50
<input type="checkbox"/> SATURDAY	\$95.00
<input type="checkbox"/> 1 ST OVERNIGHT - CALL	
<input type="checkbox"/> LOCAL DELIVERY- CALL	

REGULAR PROCESS TIME:	7 TO 10 DAYS
THE CONSULATE IN SAN FRANCISCO IS CLOSED EVERY MONDAY.	
THE EMBASSY IN DC IS CLOSED EVERY FRIDAY.	
THE CONSULATE IN NEW YORK IS CLOSED EVERY MONDAY.	

COMMENTS: THERE WILL BE AN ADDITIONAL \$125.00 FEDEX (TO/FROM) FEE IF THE CONSULATE IS NOT LOCATED IN HOUSTON, TEXAS.

REVISED: 1-29-2026 (EL)



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ALGERIA WORK VISA

U.S. PASSPORT HOLDER

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

- 1.) **SIGNED U.S. PASSPORT** (MINIMUM OF 6 MONTHS VALIDITY)
- 2.) **TWO (2) RECENT PASSPORT - TYPE PHOTOGRAPHS** (2x2)
- 3.) **ONE (1) COMPLETED APPLICATION** – PLEASE SEE THE NEXT PAGE MARKED “LIST OF JURISDICTIONS” AND CLICK ON THE LNK TO COMPLETE THE CORRECT APPLICATION FOR THE JURISDICTION THAT YOU LIVE IN. **ALL APPLICATION FORMS MUST BE FULLY COMPLETED WITH NO FIELDS LEFT BLANK** (APPLICATIONS RECEIVED WITH MISSING INFORMATION SHOULD EXPECT DELAYS).
- 4.) **COPY OF TRAVEL ITINERARY**
- 5.) **CLEAR COPY OF PROOF OF RESIDENCE** – DRIVER LICENSE OR UTILITY BILL
- 6.) **ONE (1) COMPANY LETTER OF GUARANTEE** –**MUST INCLUDE THE PASSPORT DETAILS OF THE APPLICANT** (PASSPORT NUMBER, DATES OF ISSUE AND EXPIRATION, PLACE OF ISSUE). BE SURE TO MENTION IN THE LETTER THAT ONCE THE CONTRACT HAS BEEN COMPLETED THE APPLICANT WILL REPATRIATE BACK TO THE U.S. AND WILL BE EMPLOYED BY YOUR COMPANY.
- 7.) **INVITATION FROM ALGERIA SPONSOR COMPANY (ORIGINAL)** (MENTION IN THE LETTER THAT ONCE THE CONTRACT HAS BEEN COMPLETED THE APPLICANT WILL REPATRIATE BACK TO THE U.S. AND WILL CONTINUE HIS EMPLOYMENT WITH THE U.S. COMPANY) – STAMPED BY THE MINISTRY
- 8.) **TEMPORARY EMPLOYMENT AUTHORIZATION (ORIGINAL) APPROVED BY THE ALGERIAN MINISTRY OF LABOR** (“AUTORIZATION PROVISIOIRE DE TRAVAIL OR A.P.T.”) – STAMPED BY THE MINISTRY
- 9.) **ONE (1) CONTRACT BETWEEN ALGERIA SPONSOR AND APPLICANT (ORIGINAL)** – STAMPED BY THE MINISTRY
- 10.) **CONSULATE FEE:** \$190.00

CONTINUED...



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PLEASE NOTE: ON THE APPLICATION WHERE IT ASKS FOR PURPOSE OF TRAVEL, BE SURE TO LIST THE PURPOSE OF VISIT INFORMATION IN DETAIL. THE EMBASSY WILL REJECT THE APPLICATION IF APP ONLY LISTS "WORK" OR "VISIT" ETC. BE SURE TO LIST EXACTLY WHY THE APPLICANT IS TRAVELING TO ALGERIA. THE CONSULATE WILL NOT ISSUE THE VISA THE PASSPORT CONTAINS AND ISRAELI ENTRY/EXIT STAMP.

VALIDITY: THE EMBASSY WILL NORMALLY ISSUE THE VISA ACCORDING TO THE DATES LISTED ON THE APPLICATION. BE SURE TO LIST ON THE APPLICATION WHERE IT ASK FROM WHAT DATE YOU ARE REQUESTING THE VISA TO BE VALID FROM (PLEASE LIST THE EARLIEST POSSIBLE ENTRY DATE). **ONCE THE VISA HAS BEEN ISSUED THIS DATE CANNOT BE CHANGED.** THE VALIDITY, DURATION OF STAY, AND NUMBER OF ENTRIES OF THE VISA IS ISSUED AT THE DISCRETION OF THE CONSULAR OFFICERS, WHOSE DECISIONS ARE BASED ON THE LAWS AND REGULATIONS OF ALGERIA.

REVISED: 1-29-2026 (EL)

List of Jurisdictions for Algeria Visa Process

Consular jurisdiction of the Consulate General in San Francisco:

California – Arizona – Nevada – Oregon – Washington – Utah – Colorado – Hawaii – Alaska – North Dakota – South Dakota – Nebraska – Oklahoma – Texas – Kansas – Wyoming – Montana – Idaho – New Mexico.

[Click Here](#) for the visa application if you live in any of the above states.

Consular jurisdiction of the Consulate General in New York:

Alabama – Arkansas – Connecticut – Florida – Georgia – Illinois – Indiana - Iowa – Kentucky – Louisiana – Maine – Massachusetts – Michigan – Minnesota – Mississippi – Missouri - New Hampshire - New Jersey - New York – Ohio – Pennsylvania - Rhode Island – Tennessee – Vermont - Wisconsin.

[Click Here](#) for the visa application if you live in any of the above states

Consular jurisdiction of the Algerian Embassy in Washington DC:

North Carolina - South Carolina – DC - Delaware – Maryland – Virginia - West Virginia.

[Click Here](#) for the visa application if you live in any of the above states

Revised: 1-22-2026 (EL)



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EXAMPLE OF A COMPANY LETTER OF GUARANTEE

DATE: _____

EMBASSY/CONSULATE OF ALGERIA

(PLEASE DO NOT ATTENTION THIS LETTER TO VIP PASSPORTS)

GENTLEMEN:

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

PASSPORT NUMBER:

PASSPORT PLACE OF ISSUE:

PASSPORT DATE OF ISSUE:

PASSPORT DATE OF EXPIRATION:

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 **(LIST TYPE OF VISA)** ENTRY VISA AT YOUR EARLIEST CONVENIENCE.

THANK YOU,

SUPERVISOR NAME

SUPERVISOR'S POSITION/JOB TITLE

Adresse en Algérie:

N.I.S.

Numéro d'Article:

TIN

ENGAGEMENT DE RAPATRIEMENT

CONFORMEMENT A L'ARTICLE 5 BIS 1 ALINEA 6 ET 7 DU

DECRET PRESIDENTIEL 03 25 1 DU 19 JUILLET 2003

Je soussigne

Agissant en qualité de ...

Au nom de l'organisme employeur

M'ENGAGE A RAPATRIER LE RESSORTISSANT ETRANGER.

Mr

De nationalité , Occupant le poste de

Passeport N° délivré le

A LA RUPTURE DE LA RELATION DE TRAVAIL.

OU A LA FIN DE SON CONTRAT



Le Directeur de Personnel

مديرية التشغيل لولاية ورقلة
رقم

رخصة فردية مؤقتة للعمل

طبقاً للمادة 05 مكرر الفقرة 6 و 7 من المرسوم الرئاسي رقم 03-251 المؤرخ في 2003.07.19
المتعلق بوضعية العمال الأجانب بالجزائر ، تمنح رخصة مؤقتة للعمل لـ :

الإسم : ..
اللقب : ..
مكان الميلاد : ..
إيـن : ..
من جنسية : ..
جواز سفر رقم : ..
من طرف : ..
لـيشغل منصب العمل : ..
بشركة : ..
لمدة : ..
من : .. إلى : ..

حرر في

مدير التشغيل لولاية

هام : تسلم هذه الرخصة لطلب تأشيرة العمل للدخول للجزائر فقط و لا يمكن لحاملها العمل دون الحصول على جواز العمل أو رخصة عمل مؤقت.

- تقدم الهيئة المستخدمة طلب جواز العمل أو رخصة العمل المؤقت لدى مصالح مديرية التشغيل في أجل أقصاه خمسة عشر يوم من تاريخ دخول العامل الأجنبي التراب الوطني.

MINISTERE CHARGE DE L'EMPLOI

ANNEXE 2

AGENCE NATIONALE DE L'EMPLOI

MAIN D'OEUVRE ETRANGERE

WILAYA DE : **TAREF**

(Loi n° 81-10 du 11 juillet 1981

DATE ET N° :

- Décret n° 82-510 du 25 décembre 1982

CONTRAT DE TRAVAIL

Je soussigné :

Agissant en qualité de :

Au nom de l'organisme employeur ci-après désigné :

Nature de l'activité de l'organisme employeur :

M'engage à assurer un travail continu, pour une durée de (1) **12 mois**

A compter du **01 février 2011** en qualité de :

A monsieur, ~~Mme~~ **Melle** :

Nationalité :

Date et lieu de naissance :

Adresse en Algérie :

Qualification professionnelle :

Lieu de l'emploi :

Salaire mensuel net : Brut :

Prime et d'indemnité (nature et montant) :

Avantages en nature : logement, scolaire,

Affiliation à la sécurité sociale :

Dans le pays d'origine : **Non**

En Algérie (2) : **Oui**

Signature du travailleur étranger :

Fait à **Alger**

Le **16 janvier 2011**

Cachet de l'organisme employeur

Nom et prénom du signataire :

(1) la durée du contrat de travail ne saurait être inférieure à trois mois ni supérieure à deux ans
(2) rayer l'une des mentions s'il y a lieu.