



EMBASSY OF THE REPUBLIC OF INDONESIA
ØREHØJ ALLE 1, 2900 HELLERUP
COPENHAGEN - DENMARK
PHONE: +45 3962442; FAX: +45 39624483

Application Number (office use only) : 7L / / 20

Date : - - DD-MM-YYY

Passport
Size
Picture

I. PERSONAL DATA

First and Middle Name :

Family/Surname :

Sex and Marital Status : Male Female
 Married Single

Place and Date of Birth :

Nationality :

Address :

City/Province and State :

Phone Number : - -

Profession : Professional Government Businessman
 Student Housewife Others

E-mail Address :

Name of Company/Institution :

Address :

City/Province and State :

Phone Number : - -

II. GENERAL

Duration of Stay in Indonesia : Day (s) Month (s) Year (s)

Type of Visa : Single Entry Limited Stay
 Multiple Entry

For Visit Visa

Purpose of Visit : Tourism Convention Family Visit Sports
 Study Arts Commercial Others

Country Destination :

Place of Visit :

Flight/vessel Name :

For Limited Stay

Purpose of Limited Stay : Work Joint Family Social Others

Address in Indonesia :

City/Province :

Phone Number : - -

Port of Entry into Indonesia :

Date of Entry : - - (DD-MM-YYYY)

III. PASSPORT INFORMATION

Passport/travel Document Number :

Place of Issue :

Date of Issue : - - DD-MM-YYYY

Date of Expire/Valid Until : - - DD-MM-YYYY

Type of Passport : Personal Family

Please complete this section if your spouse and/or dependants include on your passport/travel document are travelling with you :

No.	Relation (s)	Sex	Date of Birth (DD-MM-YYYY)	Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>

Please use this code : Relations : 1: Husband 2:Wife 3:Child
 Sex : F: Female M: Male

IV. SPONSOR IN INDONESIA (IF ANY)

Type of Sponsor : Individual Government International Institution
 Company NGO Others

Name of Person/Institution :

Address :

City/Province :

Phone Number : - -

V. OTHER INFORMATION

Have you ever been to Indonesia before? : Yes No

Are you in possession of any other countries' travel documents? : Yes No

Do you have previous visa to enter Indonesia? : Yes No

Has your visa application been refused before? : Yes No

Have you ever been deported from Indonesia? : Yes No

Have you ever committed a crime or any offense? : Yes No

Name of Airline Company :

You are holder of : Return Through One way

Place of Issue of ticket :

Issuance date of ticket : - - DD-MM-YYYY

Expiry date of ticket : - - DD-MM-YYYY

I hereby declare that the statements given above are true and I understand that even if granted a visa, the admission at the airport remains the discretion of the immigration authorities in Indonesia.

Applicant's Signature

Copenhagen., : - - DD-MM-YYYY

Important Note :

- * To be completed in duplicate with two passport size photographs attached
- * Applicant's original signature is required
- * Passport must be valid for at least six Months for single entry visa
- * Passport must be valid for at least one and half years for multiple entry visa