

CONSULATE GENERAL OF NIGERIA  
828 2nd AVENUE, NEW YORK, N.Y. 10017  
TELEPHONE: 212-808-0301



**APPLICATION FOR VISA**

1. Family Name \_\_\_\_\_ Other Names \_\_\_\_\_
2. Former Names and Aliases \_\_\_\_\_
3. Sex M / F 4a. Present Nationality \_\_\_\_\_
- 4b. Previous Nationality (if any) \_\_\_\_\_
5. Place of Birth \_\_\_\_\_  
(City) (Country)
- 5b. Marital Status (Single/Married/Widow/Widower/Divorced) **PRINT CURRENT EMAIL ADDRESS HERE**
6. Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EMAIL: \_\_\_\_\_  
(Date) (Month) (Year)
7. Residential Address \_\_\_\_\_ Tel ( ) \_\_\_\_\_ - \_\_\_\_\_
8. Office Address \_\_\_\_\_ Tel ( ) \_\_\_\_\_ - \_\_\_\_\_
9. Profession \_\_\_\_\_ 10. State what branches of the armed forces of your country you  
have served in or are serving \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_
11. Colour of Hair \_\_\_\_\_ Colour of Eyes \_\_\_\_\_ Height \_\_\_\_\_ Complexion \_\_\_\_\_
12. Visible identification marks \_\_\_\_\_ 13. Passport No. \_\_\_\_\_
14. Reason for journey \_\_\_\_\_  
\_\_\_\_\_
15. Date of previous visit to Nigeria and address at which you stayed \_\_\_\_\_  
\_\_\_\_\_
16. Proposed date of travel \_\_\_\_\_ 17. Length of Stay \_\_\_\_\_  
(date/month/year)
18. If your reason for journey to Nigeria is for employment, state: (a) Name of employers \_\_\_\_\_  
(b) Post to be occupied \_\_\_\_\_ (c) Give a full description of job \_\_\_\_\_  
\_\_\_\_\_
19. Persons joining spouses, parents or relatives, should give full particulars of the employment of parents or spouse in  
Nigeria including the address of where they reside \_\_\_\_\_  
\_\_\_\_\_
20. How long has/have your spouse/parents been in Nigeria? \_\_\_\_\_
21. Give your intended address in Nigeria (NOT P.O. BOX) \_\_\_\_\_  
\_\_\_\_\_

22. Have you applied for a Nigerian Visa before? Yes \_\_\_ / No \_\_\_
23. Where? \_\_\_\_\_
24. Indicate whether visa was granted Yes \_\_\_ / No \_\_\_
25. Give reason if "No" to question # 24 \_\_\_\_\_
26. How long have you lived in the country where you are applying for Visa/Entry Permit \_\_\_\_\_
27. Have you ever:
- (a) been affiliated with any contagious disease (e.g. Tuberculosis) or suffered serious mental illness? Yes \_\_\_ / No \_\_\_
  - (b) been arrested or convicted for any offense or crime even though subject of a pardon, amnesty, or other such legal action? Yes \_\_\_ / No \_\_\_
  - (c) been involved in narcotic activities? Yes \_\_\_ / No \_\_\_
  - (d) been deported Yes \_\_\_ / No \_\_\_ If so, from which country? \_\_\_\_\_
  - (e) sought to obtain a visa by misrepresentation or fraud? Yes \_\_\_ / No \_\_\_

**NOTICE: MONEY ORDER NUMBER(S) MUST BE ENTERED BELOW BEFORE SUBMITTING THIS FORM FOR PROCESSING OTHERWISE FORMS WILL BE INCOMPLETE.**

28. US MONEY ORDER NUMBER: \_\_\_\_\_
- 28b. VALID EMAIL ADDRESS (PRINT): \_\_\_\_\_

**I UNDERSTAND THAT I WILL BE REQUESTED TO COMPLY WITH THE IMMIGRATION / ALIEN ACTS AND OTHER REGULATIONS GOVERNING ENTRY OF IMMIGRATION INTO THE COUNTRY FOR WHICH I NOW APPLY FOR VISA / ENTRY PERMIT.**

**DATE** (DAY) \_\_\_\_\_ / (MONTH) \_\_\_\_\_ / (YEAR) \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

