## EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR WASHINGTON DC APPLICATION FOR EMPLOYMENT VISA

1.	Name in full (In Block Letters)			
2.	Father's Full Name			
3.	Nationality	$4. \operatorname{Sex} \square (F) / \square (M)$	Two color photos with full face,	
5.		6. Place of Birth	front view, no hat and against a plain	
7.	Present Occupation		light background (attached with staple)	
8.	Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Single			
9.	Spouse's Full Name:			
	Passport			
	(a) Number	(b) Date of Issue (dd/mm/yyyy) /	/	
	(c) Place of issue	(d) Issuing Authority:		
	☐ United States	☐ United States, Department of State	te /	
	☐ Other:	-		
	(e) Date of expiration (dd/mm/yyyy) /			
11.	Present address in US			
12.	Contact Tel. No. (Res.)	(Work)		
	Address in Myanmar			
14.	Purpose of entry into Myanmar			
15.	Expected dt. of Arrival: (dd/mm/yyyy) /	/ & Departure: (dd/mm/vvvv) /	. /	
	Name and Address of Guarantor during stay in			
100				
17.	Attention for Applicants			
	shall not interfere			
	in the internal affairs of the Republic of the Union of Myanmar.			
	(b) Legal actions will be taken against those who violate or contravene any provision of the existing			
	laws, rules and regulations of the Republic of the Union of Myanmar.			
	, 2	j		
I he	ereby declare that I fully understand the a	bove mentioned conditions, that the	particulars given	
	ve are true and correct and that I will not en	ngage in any activities irrelevant to the	purpose of entry	
stat	ed herein.			
Date	e	Signature c	of Applicant	
	(FOR OFFI			
	a No			
	a Authority			
Dat				
	ce. Washington D.C, United States of Amer	ica Embassy of the Repub of Myanmar, Was		

Contact: Tel. (202) 332 4352, (202) 238 9332 Fax.(202) 332 4351. http://mewashingtondc.com, e-mail: mewdcusa@yahoo.com)

## EMBASSY OF THE REPUBLIC OF THE UNION OF MYANMAR WASHINGTON D.C.

## **Work History for Visa Applicant**

1.	Name in Full (Fill in block letters):		
	Surname (As in Passport):		
	First Name & Middle Name:		
2.	Date of birth (dd/mm/yyyy)://		
3.	Place of birth: City; Country;		
	Permanent Home Address:		
5.	Tel. (Res.)		
	(Work Place)		
	e-mail:		
6.	Work Description (Current)		
	(a) Job Title:		
	From (dd/mm/yyyy):/ To (dd/mm/yyyy)://		
	(b) Office	<del> </del>	
	Department		
	Describe your duties:		
7	W. d. D. winting (Durations)		
/.	Work Description (Previous)		
	(a) Job Title:  To (dd/mm/ygggy): / / To (dd/mm/ygggy): / /		
	From (dd/mm/yyyy):/ To (dd/mm/yyyy)://		
	(b) Office		
	Department		
	Describe your duties:		
	I hereby declare that the particulars given above are true and correct.		
		Signature of Applicant	
	Date: (dd/mm.	/yyyy) / /	