

**IMPORTANT:**

To be filled in block letters.  
The permission of the Ministry of Home Affairs and Immigration must be obtained before:

- a) the purpose and period of residence may be changed; or
- b) employment may be accepted; or
- c) employment/employer may be changed

**THE REPUBLIC OF NAMIBIA**  
**Ministry of Home Affairs and Immigration**



**IMMIGRATION CONTROL ACT, 1993**  
**ARRIVAL FORM**  
 (Section: 8 & 29 Regulation 2)  
**DEPARTURE FORM NAMIBIA**  
**REGULATION ACT, 1993**  
 (Act 34 of 1993)

**ARRIVAL/DEPARTURE FORM**

**DEPARTURE FORM**  
**(SECTION 9A/REGULATION 2)**

**ARRIVING AND DEPARTING PASSENGERS: PLEASE ANSWER QUESTIONS 1 - 16, THEN SIGN AND DATE**

**FOR COMPLETION BY ARRIVING AND DEPARTING, PLEASE COMPLETE IN INK**

Surname:			First Names:			
3. Sex (tick)	Male <input type="checkbox"/>	Female <input type="checkbox"/>	4. Date of Birth	day	month	year
5. Country of Birth			6. Country of Present Residence			
7. Nationality of Passport			8. Passport Number			
9. Passport Expiry Date	Day	Month	Year	10. Number of accompanying Children under 16	Male	Female
11. Mode of travel (tick one box)						
Air	<input type="checkbox"/>	Flight No. _____	Sea	<input type="checkbox"/>	Name of vessel: _____	
Road	<input type="checkbox"/>	Reg No: _____	Other	<input type="checkbox"/>	Specify _____	
Rail <input type="checkbox"/>						
12. Occupation: _____						

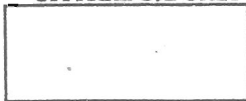
**PHYSICAL ADDRESS IN NAMIBIA**

13. Address in Namibia _____	
14. Purpose of Entry (tick one box)	
i. <input type="checkbox"/> Namibians	v. <input type="checkbox"/> In Transit / Stopover
ii. <input type="checkbox"/> PRP Holders	vi. <input type="checkbox"/> Diplomats
iii. <input type="checkbox"/> Visiting Friends / Relatives	vii. <input type="checkbox"/> Business / conference / Professionals
iv. <input type="checkbox"/> Holiday / Tourist / Recreation	viii. <input type="checkbox"/> TRP, EP & SP Holders
	xi. <input type="checkbox"/> Other Specify _____
15. Length of intended stay in Namibia .....nights/weeks/months	

16. Visitors to the Republic of Namibia, ± state the amount of money you intend to spend during your visit (excluding fare to and from Namibia) N\$

I declare that the above is to the best of my knowledge and believe correct  
 Signature: ..... Date: .....

**OFFICIAL USE ONLY**



Numbers of days granted:

Signature of Immigration Officer

Visa Number:	Visa Type:
Office of issue:	Visa Expiry:
N   PRP   T,ST	T/S   B,C,P   D   O