



## VISA APPLICATION FORM

**Service Required**

- New Employment Visa
- Renewal
- Work Permit Only
- Visa Transfer

**Service Required**

- Outside The UAE
- Inside The UAE

**Service Required**

- Tourist
- Cancelled
- Visa on Arrival

↳ Visa Valid Until

**Applicant Information**

**Salutation**

- Mr.  Mrs.  Ms.  Dr.

**First Name**

**Middle Name**

**Last Name**

**Email Address**

**Mobile Number**

**UAE Address (if applicable)**

**Address**

**City**

**State**

**Country**

**Emirate**

**PO Box**

**Postal Code**

**Home Country Address**

**Address**

**City**

**State**

**Country**

**Emirate**

**PO Box**

**Postal Code**

Do you have a previous Emirates ID?  Yes  No

If Yes, please provide EID Number

EID Expiry Date

**Nationality**

**Passport Number**

**Issue City**

**Issue Country**

**Passport Issue Date**

**Passport Expiry Date**

**City of Birth**

**Country of Birth**

**Date of Birth**

**Gender**

**Previous Nationality**

**Marital Status**

**Religion**

**If Islam, please indicate subcategory (example: Sunni, Shia)**

**Language(s) Spoken**

**Father's Full Name**

**Mother's Full Name**

Applicant Name:

Applicant Signature:

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### Applicant Information

Type of Employment Contract

Unlimited

Limited

If Limited, please specify duration of contract in months:

Annual Leave Entitlement

Working Days (Min. 22 Days)

If Working Days, please specify leave duration:

Calendar Days (Min. 30 Days)

If Working Days, please specify leave duration:

Job Title

Start Date

Probation Period (0 - 6 months)

Termination Notice (1 - 3 months)

Educational Qualification

#### Monthly Salary Breakdown

Basic Salary (AED)

Transportation Allowance (AED)

Total Monthly Salary (AED)

#### NOTES FOR JOB TITLES:

- (1) Your Degree Certificate should be in English/Arabic & attested by the UAE Ministry of Foreign Affairs
- (2) For Shareholders only; additional charges may apply
- (3) If you are applying for a residence visa for the General Manager, then this must be for the same person designated as the General Manager in the IFZA License Application Form
- (4) For Single Shareholder Company only; additional charges may apply

Return Ticket Eligibility (Economy, Business or First Class)

Ticket Entitlement Period (None, 1 or 2 Years)

Accommodation Allowance (AED)

Other Allowance (AED)

I hereby confirm that I have read and I accept the attached Terms and Conditions

[DOWNLOAD TERMS & CONDITIONS](#)

Right-click button and select "open new tab" to view

### Company Details

Company Name:

Applicant Name:

Establishment Card Number:

#### DECLARATION

I hereby declare that to the best of my knowledge and belief that all the particulars provided in this application are true and accurate in all respects. I acknowledge and accept the specific conditions pertaining to the issue of Visas as set out in Clauses 15 to 18 of IFZA's Terms & Conditions

Date:

Applicant Name:

Applicant Signature:

General Manager Name:

General Manager Signature: