(DHA-84) Form 11



DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA

APPLICATION FOR PORT OF ENTRY VISA OR TRANSIT VISA [Section 7(1)(g) read with section 10A and 10B; Regulation 8(1)]

NB: A SEPARATE APPLICATION FORM MUST BE COMPLETED IN RESPECT OF EACH ACCOMPANYING FAMILY MEMBER.

PERSONAL PARTICULARS Surname: First names (in full): Maiden name: Previous surname(s): Y M M D D Date of birth: Country of birth: Gender (write in full) If acquired by naturalisation, state original Nationality: nationality: Where and when was present nationality obtained:

Passport/Travel Document Number:	Issuing authority: Date of expiry:
Type of document: Diplomatic/Official/Ordinary Passport/Travel document/other (specify)	Date of expirit.
Permanent residential address in country of n	ormal residence
Period resident at this address:	•
Country of permanent residence:	Telephone number: ()
	Home telephone No.:
*	Cellphone No.:
	E-mail address:
	# ±
Period resident in that country:	
Occupation or profession:	
Address:	
	ax No.:

If self-employed	d, state	na	me, a	ıddres	s, tele	pho	one no.	and na	ture	e of business:		
Name of busine												- 10
Telephone No.:.												- 1
Marital status:	Neve marrie			Mar	ried		Widov	ved		Separated	Divorced	
First name(s) of	f spous	e:										
Maiden name												
Date and place marriage	of											
	Y	1	/ Y	Y	М	M	D	D	F			
Date of birth of spouse:									ı	Nationality	***************************************	***
VISIT TO SOUTH	l AFRI	CA										
Expected date of Place of arrival:		••••	•••••			• (6)	Purpo	se of vi	sit:			
Duration of stay	-			s or da	ays)	- 1930						
Single Two Multiple	es requ	ired	d:									
Proposed reside hotel:	ntial ad	ddre	ess (p	hysica	ıl) in t	he	Republ	ic, inclu	din	g the full name	(s) of your host	i or
Residential (phy												
**************		****	******						• • • •	**************	****************	() 12):
Name of Host or Telephone of Ho												

Names of Organisations	or persons you will be contacting during	your stay in the Republic:
Name	Address	Relationship

Identity document number or permanent residence permit number of South Afric	can host,	where
applicable:		
Indicate by means of an X whichever is applicable		
	Yes	No
Have you at any time applied for a permit to settle permanently in the	i res	INO
Republic?		
Have you ever been restricted or refused entry into the Republic?	Yes	No
Have you ever been deported from or ordered to leave the Republic?	Yes	No
Have you ever been convicted of any crime in any country?	Yes	No
Is a criminal action pending against you in any country?	Yes	No
Are you an unrehabilitated insolvent?	Yes	No
Are you suffering from tuberculosis or any other infectious or contagious	Yes	No
disease or any mental or physical deficiency?		
Have you ever been judicially declared incompetent?	Yes	No
Are you a member of, or adherent to an association or organisation	Yes	No
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advocating the practice of social violence or racial hatred or are you or have
you been a member of an organisation or association utilizing crime or
terrorism to pursue its ends?
Give particulars if reply to any of the questions above is in the affirmative:
In the case of an official visit, submission of a Note Verbale.
In the case of a diplomat placed in the Republic, proof of placement.
To be completed only by passengers in transit to another country:
Destination after leaving the Republic:
Destination after leaving the Republic:

understand the meaning there I understand that should my p would not be allowed to chang I understand that if I need to such an application will only expiry date of my current visas I understand that if I depart the	by me are true in substand of; ort of entry visa / transit vis ge my purpose of visit whils extend my stay in the Rep be accepted if it is submitt g and from the Republic after the irable person and that I w	ublic for whatever reason, that ed at least 30 days prior to the expiry date of my visa, that I vould not qualify for a visa or
Signature of applicant		Date
	FOR OFFICIAL USE	
Approved/not approved by	Type of visa:	Reasons for decision:

DOCUMENTATION TO BE SUBMITTED IN SUPPORT OF A VISA NOT EXCEEDING A PERIOD OF THREE MONTHS

	Attacl	ned
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic		
Proof of sufficient financial means		
Proof of a valid return or onward ticket or purchase of ticket.		
Documentation outlining the purpose and duration of the visit, or a written invitation by the host(s) in the Republic, as the case may be.		
Where the applicant is attending an activity or event, a letter from the organisation under whose control the activity or event is taking place, confirming such attendance and whether or not the foreigner will be remunerated, and if remunerated, the amount of the remuneration	E	
 In respect of a dependent child accompanying the applicant to or joining the applicant in the Republic— (a) proof of consent from one or both parents or legal guardian, as the case may be, in the form of a letter or affidavit; (b) Where applicable, a copy of a court order granting the applicant parental responsibilities and rights in respect of the child; (c) A letter from the person who is to receive the child in the Republic, containing his or her residential address in the Republic where the child will be residing; (d) A copy of the identity document or valid passport and visa or permanent residence permit of the person who is to receive the child in the Republic; and 		
(e) The contact details of the parents or legal guardian.		

		Attach	ed
		Yes	No
(a)	Dect of medical treatment for a period not exceeding three months— A letter from the applicant's registered medical practitioner or medical institution within the Republic, confirming— (i) that space is available at the medical institution; (ii) the estimated costs of the treatment; (iii) whether or not the disease or ailment is curable;		
(b) I (c) (d) A (e) F	(iv) treatment schedule; and (v) the period of intended treatment in the Republic. Details of the person or institution responsible for the medical expenses and hospital fees: Provided that in the case where the applicant's medical scheme or employer is not liable for expenses neurred, proof of financial means to cover the medical costs. The particulars of the persons accompanying the applicant A valid return air flight ticket, where applicable Proof of sufficient financial means or provision for the costs indirectly related to the treatment.		
	provide proof of registration of the learning institution as contemplated in the relevant legislation, within 60 days of registration; in the event of failure to register by the closing date, provide the Director-General with a notification of failure to register within 7 days of the closing days of registration; within 30 days, notify the Director-General that the applicant is no longer registered with such institution; and		

	Attac	ched
	Yes	No
In respect of short-term work to be undertaken in the Republic, a letter for	rom	
the employer stipulating—		-
(a) the purpose or necessity of the work		
(b) the nature of the work;		
(c) qualification and skills required for the work;	i i	×
(d) the duration of the work;		
(e) the place of work		
(f) duration of the visit;		
(g) proof of remuneration or stipend that the foreigner will receive from	the	
employer; and		
(h) identity and contact details of the prospective employer or relevant	vant	
contact person from the host institution.		

DOCUMENTATION TO BE SUBMITTED IN SUPPORT OF A VISITOR'S VISA APPLICATION FOR A PERIOD EXCEEDING THREE MONTHS

	Attach	ned
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic		
A yellow fever vaccination certificate, where applicable.		
A medical report.		
A radiological report.		
Marriage certificate or in the case of a foreign spousal relationship, proof of official recognition thereof issued by the authorities of the country concerned, if available.		
The affidavit where a spousal relationship to a South African citizen or resident is applicable, as well as documentation proving cohabitation and the extent to which the related financial responsibilities are shared by the parties and setting out the particulars of children in the spousal relationship.		
Divorce decree, where applicable.		
Court order granting full or specific parental responsibilities and rights, where applicable.		
Death certificate, in respect of late spouse, where applicable.		
Written consent from both parents and court order granting full parental responsibilities and rights parent, where applicable.		