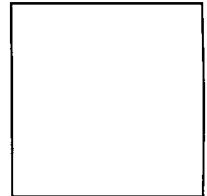




CONSULADO GENERAL DE EL SALVADOR
 1724 TWENTIETH STREET N. W.
 WASHINGTON D. C. 20009



APPLICATION FOR VISA
FORM 100

No. _____
 Please print clearly and complete all information as it appears in your passport
 I am applying for a visa to enter El Salvador and hereby declare that the following information is true:
 LAST NAMES: _____

FIRST NAMES: _____

PLACE OF BIRTH: _____

DATE OF BIRTH: _____ NATIONALITY: _____

PASSPORT No.: _____ ISSUED AT _____

DATE OF ISSUE: _____ EXPIRATION DATE: _____

HOME ADDRESS: _____

PRESENT OCCUPATION _____

NAME AND ADDRESS OF EMPLOYMENT _____

HOME PHONE NUMBER _____ WORK PHONE NUMBER _____

DATE OF ENTRY INTO E SALVADOR _____

MEANS OF TRANSPORTATION _____

PURPOSE OF YOUR TRIP _____

LENGTH OF STAY _____ RESIDENCE WHILE IN EL SALVADOR _____

NAME AND NATIONALITY OF SPOUSE _____

PERSONAL OR BUSINESS REFERENCES IN EL SALVADOR (Name, Address and Tel. No) _____

HAVE YOU PREVIOUSLY APPLIED FOR A VISA TO EL SALVDOR: YES _____ NO _____

WHERE: _____ WHEN _____

WAS IT ISSUED: YES _____ NO _____

ARE YOU A PERMANENT RESIDENT OF THE USA OR ANY OTHER COUNTRY? _____

WHAT OTHER COUNTRY _____

PERSONS ACCOMPANYING (Names, relationship and passport Numbers):

Name	Relationship	Passport Number

SWORN STATEMENT: I hereby declare under oath that during my stay in El Salvador I will not participate in any political activities nor perform any acts which may be construed as interference in the internal affairs of the country.

PLACE AND DATE: _____

 SIGNATURE OF APPLICANT