

**APPLICATION FORM FOR VISA TO CHILE**  
(To be only typed in Block Letters)

**This application form is free**

Color  
Photograph  
(To be pasted)  
35 mm X 45 mm

1. Last Name(s) as shown on the Passport\*

2. First and Middle Names(s) as shown on the Passport\*

3. Other Name(s)

4. Last Name(s) of Father

5. Last Name(s) of Mother

6. Sex

Male

Female

7. Date of birth ( Day/Month/Year)

8. Place of birth (City, Province, Country)

9. Local Document Type and No.

10. Nationality (Current, Origin)

11. Home Address

12. Home Telephone No.

13. Profession

14. Marital Status

15. Activity

16. Employer

17. Business Telephone No.

18. Color of Hair

19. Color of Eyes

20. Complexion

21. Height

22. Particular Features

23. Passport No. / Travel Document

24. Place and Date of Issuance

25. Expiration Date

26. Type of VISA

27. Reason of Travel

28. Length of Permanence

29. Particulars of Host (Name/Last Name - Address and Phone No.)

30. Arrival Date

31. Address in Chile (Lodging Place)

32. Departure Date

33. Spouse (Last Name, Names, Nationality, Date of Birth)

34. Children (Last Name, Names, Nationality, Date of Birth)

35. Have you applied for VISA before?

- No
- Yes

36. When? Year

37. Where?

38. Did you Enter?

- No
- Yes

39. When? Year

40. Length of Permenence

41. Reason

42. Is any of the Following people in Chile? Spouse Fiancee/Fiancee Brother/ Sister/Father/Mother other

43. List The Countries You Have Lived for More Than Six Months Along The Last 5 Years, Commencing From Your Current Residence.

## AFFIDAVIT & SIGNATURE

I declare that I am aware that during my stay in Chile I may not carry out gainful activities nor intervene in its internal policy or in acts against its Political Constitution or the Laws, Decrees and other provisions applicable in its territory and promise, during my stay in Chile NOT to apply for a change of my status of tourist. I further declare that all the particulars contained in this Application are true.

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Date

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Applicant(s) Signature