## FORM 14A IMMIGRATION ACT 1959 [SECTION – 55(1)]

**Notes:** 

\* Check the box where appropriate

Affix a recent Passport-size photograph here

## APPLICATION FOR ENTRY VISA

ALI LICATION FOR ENTRY VISA																										
PART I – PARTICULAR	PART I – PARTICULARS OF APPLICANT																									
Name: (Full name as shown in travel document)																										
Alias:																										
														!												
Date of Birth:    D D M M Y Y Y Y Y   Sex:*   Male   Female																										
Marital Status:* Single Married Separated Divorced Widowed Cohabited Customary																										
Nationality/Citizenship of Spouse:*  Singapore Citizen  NRIC No.																										
	Singapore Permanent Resident NRIC No.																									
Others (Please Specify):																										
Country/Place of Birth:																										
State/Province of Birth:																										
Race: (e.g. Malay, Indian, Chinese, Caucasian, etc)																										
Nationality/Citizenship:																										
Type of Travel Document Held:*  International Passport Diplomatic Passport Official Passport Document of Identity Others (please specify)																										
Travel Document No.:																										
Travel Document Issued Date:			<u>     [</u>			-[	$\top$		$\top$			Exi	oiry	Dat	e: [			Н			-					
	D	D		M	M		Y	Y	Y	Y						D	D		M	M		Y	Y	Y	Y	ı
Country/Place of Issue:																										ı
E. Okin N. C. 1 O. 1																										
For Chinese Nationals Only PRC ID Number																			]							

Address in Country/Place of Origin/Residence														
Country/Place of Origin/ Residence:														
Division/State/Province of Origin/Residence:														
Prefecture of Origin/ Residence:														
County/District of Origin/ Residence:														
Address:														
PART II - OTHER DETAILS														
Email Address:														
Contact Number:														
Occupation:														
Highest Academic/ No Formal Education Primary Secondary Pre-University Professional Qualifications Attained:* Diploma University Post-Graduate														
Annual Income in Singapore dollars (SGD):														
Religion:														
Expected Date of Arrival in Singapore:  D D M M Y Y Y Y Y														
Type of Visa:* Single Journey Double Journey Triple Journey Multiple Journey														
Purpose of visit:*														
Details of purpose:														
How long do you intend to stay in Singapore:*   Less than 30 days   More than 30 days														
If your intended stay in Singapore is more than 30 days, please state the reason for your intended length of stay and the duration														

Address in Singapore															
Where will you be staying in Singapore?:*															
□ Next of Kin's Place □ Relative's Place □ Friend's Place □ Hotel □ Others (Please specify):															
Block/House No.:  Street Name:	Floor No.: Unit No.: Postal Code:  Contact No:														
Building Name:															
Did you reside in other countries/places, other than your country/place of origin, for one year or more during the last 5 years ?*															
Yes \sum No															
If yes, please furnish detai	ils	Period of Stay													
Country/Place	Address	From To													
Details of Travelling Com (Only for applicant who is airline representative.)	panion 12 years old or less at the point of application. Details are not required if appl	licant is accompanied by an													
Relationship of Travelling Companion To Applicant:															
Name:															
Date of Birth:	D D M M Y Y Y Y Y Male Fem	ale													
Nationality/Citizenship:															
Travel Document Number:															

PART III – PARTICULARS OF LOCAL CONTACT																								
Details of Local Contact or Company/Hotel in Singapore																								
Zemms of Zoem Commen of Company/Troce in Singapore																								
Name of Local Contact /Company/Hotel:		$\dashv$																						
Relationship of Local Contact/Company/ Hotel to																								
Applicant:																								
ontact No.: Email Address:																								
PART IV – ANTECEDENT OF APPLICANT*																								
(a) Have you ever been refused entry into or deported from any country/place, including Singapore?																								
DADT V DECLADATION DV ADDITCANT																								
I declare that all information submitted in this application is true, accurate and complete to the best of my knowledge and belief. I understand that, if I have concealed relevant information or provided false, inaccurate or misleading information, I may be prosecuted and any facilities, rights or privileges granted under this application may be withdrawn.																								
I undertake not to misus make me an undesirable														ctivit	ies d	lurin	g my	y sta	y in	Sing	apor	e whi	ch w	ould
I undertake to comply modification or re-enactn												and	any	reg	gulat	ions	mac	de t	herei	ınde	r or	any	statı	itory
I undertake not to involve	e in aı	ny cı	rimiı	nal off	ences	in Siı	ıgap	ore.																
I undertake not to indulg	e in a	ny a	ctivi	ties wh	ich ai	e inc	onsi	stent	with	the	purj	ose	for v	vhicl	n the	imn	nigra	tion	pass	es ha	ave b	een is	sued	
I further undertake not t issued under the Employ									nt, b	usin	ess o	r occ	cupat	tion	whil	st in	Sing	gapo	re wi	thou	t a v	alid v	vork	pass
I am aware that overstaying or working illegally in Singapore is a serious offence and on conviction, the penalties may include mandatory imprisonment and caning.																								
I understand that if the Controller of Immigration is satisfied that I or any member of my family breaches this undertaking or becomes an undesirable or prohibited immigrant, he will cancel my immigration pass and the passes of the members of my family, and we may be required to leave Singapore within 24 hours of such cancellation.																								
I understand that this ap discretionary at the point			for a	nd po	ssessio	on of	a vis	a do	es no	t gu	aran	tee e	entry	into	Sin	gapo	re a	nd p	ermi	ssion	to e	ntry i	s ent	irely
I give my consent for you assessment of my applica							ver	ify i	nfori	natio	on fr	om	or w	ith :	any	sour	ce a	s yo	u de	em a	ippr	opriat	te foi	the .
 Date		_								_	Signa	atur	e of /	Appli	icanı				_					