



CONSULADO GENERAL DE EL SALVADOR
1424 16TH. STREET N.W. SUITE 200
WASHINGTON, D.C. 20036

APPLICATION FOR A VISA TO ENTER EL SALVADOR
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 NAME: _____

FIRST NAMES: _____

PLACE OF BIRTH: _____

DATE OF BIRTH: _____ NATIONALITY: _____

PASSPORT No.: _____ ISSUED AT: _____

DATE OF ISSUE: _____ EXPIRATION DATE: _____

COMPLETE HOME ADDRESS: _____

PRESENT OCCUPATION: _____ NAME AND ADDRESS OF PLACE OF EMPLOYMENT: _____

HOME TELEPHONE NUMBER: _____ WORK TELEPHONE NUMBER: _____

DATE OF ENTRY INTO EL SALVADOR: _____ MEANS OF TRANSPORTATION: _____

REASON FOR 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 SALVADOR? (YES) (NO)

WHERE: _____ WHEN: _____

WAS IT ISSUED (YES) (NO)

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

OF WHAT COUNTRY? _____

PERSONS ACCOMPANYING (names, relationship, and passport no.) _____

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