## **Department of Immigration & Emigration**



FORM A/ IM 35 (Regulations 6)

## APPLICATION FOR THE ISSUE/ EXTENSION OF A RESIDENCE VISA FOR SRI LANKA

| To be completed      | in Block Letters                  |               |               |              |            |                |           |        |  |  |  |  |
|----------------------|-----------------------------------|---------------|---------------|--------------|------------|----------------|-----------|--------|--|--|--|--|
|                      | For office use only               |               | BOI           | Ex-SL        | Relig.Work |                |           |        |  |  |  |  |
| Application No       |                                   |               | SL Parents    | NGO          | RGS        | ]              |           |        |  |  |  |  |
|                      |                                   |               | CIT (5/2)     | Official     | Spouse     | Affi           | x a photo | ograph |  |  |  |  |
| Visa Number          |                                   |               | Clergy        | Private.Sec  | State.Sec  |                |           |        |  |  |  |  |
|                      | Day Month Ye                      | ear           | DPL           | Reg IND      | Student    |                |           |        |  |  |  |  |
| Date of Arrival/Exp  | oiry                              | Ш             | Dual          | Int: Gov     | SSRV       |                |           |        |  |  |  |  |
|                      |                                   |               | Other:        |              |            |                |           |        |  |  |  |  |
| Period granted       | Years                             | Months        | Date of Issue | e:           |            |                |           |        |  |  |  |  |
| 1. Details of Pass   | oort                              |               |               |              |            |                |           |        |  |  |  |  |
|                      | i) Number                         |               | ii)           | Place of Is  | sue        |                |           |        |  |  |  |  |
|                      | D                                 | ay Month Year |               |              | D          | Day Month Year |           |        |  |  |  |  |
|                      | iii) Date of Issue                |               | iv)           | Date of Ex   |            |                |           |        |  |  |  |  |
| 2. Details of previo | ous Passport he <u>ld, if any</u> |               |               |              |            |                |           |        |  |  |  |  |
|                      | i) Number                         |               | ii)           | Place of Is  | sue        |                |           |        |  |  |  |  |
|                      |                                   | ay Month Year |               |              |            | Day Month Year |           |        |  |  |  |  |
|                      | iii) Date of Issue                | iv)           | Date of Ex    | xpiry        |            |                |           |        |  |  |  |  |
| 3. Name in Full as   | shown in Passport:                |               |               |              |            |                |           |        |  |  |  |  |
|                      |                                   |               |               |              |            |                |           |        |  |  |  |  |
|                      | <del>1111111</del>                |               |               |              | 111        |                |           |        |  |  |  |  |
|                      |                                   |               | <del></del>   |              | <u> </u>   |                |           |        |  |  |  |  |
| 4. Nationality:      |                                   |               |               |              |            |                |           |        |  |  |  |  |
| 5. If naturalized,   | Day Month                         | Year          |               |              |            |                |           |        |  |  |  |  |
|                      | i) Date                           | i             | i) Place of i | naturalizati | on         |                |           |        |  |  |  |  |
| i                    | ii) Former Nationality            |               |               |              |            | ]              |           |        |  |  |  |  |
| 6. Gender *          | i) Male                           | ii) Female    | П             |              |            |                |           |        |  |  |  |  |
| o. dender            | Day Month Year                    | ii) i emale   |               |              |            |                |           |        |  |  |  |  |
| 7. Date of Birth     | Day World Pear                    |               |               |              |            |                |           |        |  |  |  |  |
| 7. Date of Birth     |                                   |               |               |              |            |                |           |        |  |  |  |  |
| 8 Country & Place    | of birth i. Place                 |               | ii.           | Country      |            |                |           |        |  |  |  |  |
| 9. Civil Status *    | i. Single                         | ii. Married   | iii. Wi       | dowed        |            | iv. Divor      | ced       |        |  |  |  |  |
| 10. If Married       | i) Full name of Spouse:           |               |               |              |            |                |           |        |  |  |  |  |
|                      |                                   |               |               |              |            |                |           |        |  |  |  |  |
|                      |                                   |               |               | Ш            |            |                |           |        |  |  |  |  |
|                      | ii)Nationality:                   |               |               | iv) Postal   | Address:   |                |           |        |  |  |  |  |
|                      |                                   |               |               | ГΠ           |            |                |           |        |  |  |  |  |
|                      | iii) Passport No                  |               |               | Ш            |            | Ш              |           |        |  |  |  |  |
|                      |                                   |               |               |              |            |                |           |        |  |  |  |  |
|                      |                                   | Day Month     | Year          |              |            |                |           |        |  |  |  |  |
|                      | iv) Date of expiry                |               |               | ]            |            |                |           |        |  |  |  |  |
| 11. Applicants He    | eight in centimetres              |               |               |              |            |                |           |        |  |  |  |  |
| 12. Any identificat  | ion Marks of Peculiarities:       |               |               |              |            |                | ]         |        |  |  |  |  |
| 13. Address:         |                                   |               |               |              |            |                |           |        |  |  |  |  |
| i) In the countr     | y of domicile                     |               |               |              |            |                |           |        |  |  |  |  |

| <del>- 1                                   </del>                                    | <del> </del>                                      |  |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|--|
| ii) During staying in Sri Lanka:   | <del>                                     </del>  |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| 14. Occupation/ Profession which Residence Visa is Appling for                       |   |  |  |  |  |  |  |  |  |
|  | obile   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
|  | Mail  |  |  |  |  |  |  |  |  |
| 16 Category of applying for Residence Visa*  |   |  |  |  |  |  |  |  |  |
| (a). i) Board of Investment (BOI) ii) Public Sector                                  | iii) Private Sector                               |  |  |  |  |  |  |  |  |
| iv) Student v) Ex- Sri lankan  | vi) Spouse  |  |  |  |  |  |  |  |  |
| vii) Religious viii) Registered Indian   | ix) Diplomatic Missions                           |  |  |  |  |  |  |  |  |
|  | er-Governmental organizations                     |  |  |  |  |  |  |  |  |
|  | er-Governmental organizations                     |  |  |  |  |  |  |  |  |
| xii) Other, Specify  |   |  |  |  |  |  |  |  |  |
| (b). i) Investor* ii) Expatriate   | iii) Dependant                                    |  |  |  |  |  |  |  |  |
| 17 Salary/ income per mensem SLRs / US\$   | 1   |  |  |  |  |  |  |  |  |
| 18 If an employee, name and address of employer                                      | 4   |  |  |  |  |  |  |  |  |
| i) Name  | <del></del>                                       |  |  |  |  |  |  |  |  |
| ", realize   | <del>                                      </del> |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| ii) Address  | <del></del>                                       |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| iii)Contact Numbers i) Telephone ii) Mo  | bile No   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| iii) Fax No  | mail  |  |  |  |  |  |  |  |  |
| 19 If in business and/ or owning landed property in Sri Lanka full particulars of sa | ame   |  |  |  |  |  |  |  |  |
| Name and address of business/ Land, Shares owned Busin property                      | ess registration No./ Dead No/ date               |  |  |  |  |  |  |  |  |
| роролу   |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| 20 Reasons for applying for a Residence Visa   |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| 21 Residence visa applying for*  | _   |  |  |  |  |  |  |  |  |
| i) First Issuance ii) Extens   | sion  |  |  |  |  |  |  |  |  |
| Day Month Year   |   |  |  |  |  |  |  |  |  |
| 22 Date of arrival for Residence Visa  |   |  |  |  |  |  |  |  |  |
| 23 Particulars of the prior approval   |   |  |  |  |  |  |  |  |  |
| Have you obtained prior approval* Yes No   |   |  |  |  |  |  |  |  |  |
| If Yes, Day Month Year   |   |  |  |  |  |  |  |  |  |
| i) Date of Entry visa issued   | <del></del>                                       |  |  |  |  |  |  |  |  |
| ii) Place of issuance of Entry Visa  |   |  |  |  |  |  |  |  |  |
| Day Month Year   | <del></del>                                       |  |  |  |  |  |  |  |  |
| iii) date of landing endorsement granted   |   |  |  |  |  |  |  |  |  |
| 24 Period for which a Residence visa is required Months/Years                        |   |  |  |  |  |  |  |  |  |
| 25 Was a Residence visa issued previously, If so, state                              |   |  |  |  |  |  |  |  |  |
| i) Visa Number   |   |  |  |  |  |  |  |  |  |

|   | Day Mo                | onth             | Year        |           |          |          |           |      |      |   |        |       |          |       |
|---|-----------------------|------------------|-------------|-----------|----------|----------|-----------|------|------|---|--------|-------|----------|-------|
| ii) Date of issue   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| iii) Purpose of which   | it 📗                  |                  | П           |           |          |          |           | Ī    | Ī    |   |        | Ī     |          | T     |
| was issued  |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| iv) Period for which it   | was issued            | Y                | 'ears       |           |          |          | М         | lont | hs   |   |        |       |          |       |
| v) Particulars of the F   | Passport on whice     | h the pe         | rmit w      | as iss    | sued     |          |           |      |      | D | ay M   | lonth |          | Year  |
| i) Passport No  |                       |                  |             |           |          | ii) Dat  | e of is   | sue  |      |   |        |       |          |       |
| iii) Date of expiry   | Day Month             | Yea              |             |           |          | iv Pla   | ce of is  | ssue | Э    |   |        |       |          |       |
| i) Number of present res  | idonoo Visa of s      | nouso or         | naro        | nt if a   | mv       |          | П         | T    | T    |   |        | 1     |          | T     |
| i) Number of present res  | Day Month             | pouse or<br>Year | •           | rii, ii a | ırıy     |          |           |      |      |   |        |       |          |       |
| ii) Date of issue visa  |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| Particulars of applicant's  | own children          |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| (only for whom applicati  |                       | Children         | unde        | er 16 s   | houl     | ld be ir | nclude    | d)   |      |   |        |       |          |       |
| Nar   | ne                    |                  | ate o       | f Birth   | 1        |          | Gend      | er   |      |   | Р      | lace  | of Bir   | th    |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| (Particulars of responsible p<br>applicant or who are likely to<br>Sri Lanka<br>Full Name |                       | onsibility       |             | quired    |          | applic   |           | maii | nten |   | e and  | repa  |          | n fro |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| Any other reason to urge in   | support of applic     | cation           | <del></del> | 1         | 1        |          | 1 1       | 1    | 1    |   |        | 1     | П        | 1     |
| <del>-                                      </del>  | ++++                  |                  | +           |           | +        |          | H         | +    |      |   |        | ╁     | $\vdash$ |       |
|   |                       |                  |             |           | <u> </u> |          |           |      |      |   |        | -     |          |       |
| Finger mark of the applicant  |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
|   |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| landanaha danlam dan dan da   | la farma a Nama farma |                  |             |           | 1        |          |           |      |      | u | 1.1    |       | 116.     |       |
| I solemnly declare that the<br>suppressed any informatior                                 |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| conditions subject to which t   | •                     |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| unpaid, or in any business o  |                       |                  |             |           |          |          |           |      |      |   |        |       |          |       |
| Immigration and Emigration  |                       |                  | Irocco      | o dur     | ina r    | nv stav  | , in Sri  |      | _    |   |        |       |          |       |
| immigration and Emigration  | of any change i       | n my add         | 116226      | es dui    | ii ig i  | ily olay | / 111 311 | ı La | nka. |   |        |       |          |       |
| iriiriigration and Emigration   | of any change i       | n my add         | 116226      | es dui    | iiig i   | ny ota   | / 111 311 | ı La | nka. |   |        |       |          |       |
| ininigration and Emigration   | of any change i       | n my add         | 116226      | es dui    | iiig i   | ny ola   | / III 3II | ı La | nka. |   |        |       |          |       |
| Date:   |                       | n my add         | iiesse      | es dui    | iiig i   |          |           |      |      |   | applic |       |          |       |

| Office Use Only                |   |  |  |  |  |  |  |  |
|--------------------------------|---|--|--|--|--|--|--|--|
| Special Note  Visa Endorsement | Finger Mark Affix an applicants photograph here |  |  |  |  |  |  |  |
|                                | Tax Endorsement                                 |  |  |  |  |  |  |  |
| Received Passport              |   |  |  |  |  |  |  |  |
| Date                           | Signature of Applicant                          |  |  |  |  |  |  |  |



Signature of applicant

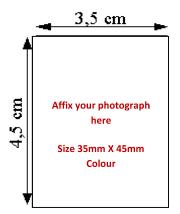
## **Department of Immigration & Emigration-Sri Lanka**



Date

## **PHOTO CAPTURING PAPER**

(Please provide the following details correctly)



| Ap   | Passport Number                         |  |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|--|
|  |   |  |  |  |  |  |  |  |  |
|  | For Office Use only                     |  |  |  |  |  |  |  |  |
| 1.   | Name in Full:                           |  |  |  |  |  |  |  |  |
| 2.   | Passport No:                            |  |  |  |  |  |  |  |  |
| 3.   | Nationality:                            |  |  |  |  |  |  |  |  |
| 4.   | Gender:                                 |  |  |  |  |  |  |  |  |
| 5.   | Category of Residence Visa applied for: |  |  |  |  |  |  |  |  |
| I hereby certify that the above details provided are true and correct. |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |

N.B: This Photo Capturing Paper should be submitted with the all types of duly completed Residence visa application(s)