

AMERICAN VISA OF DC
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Email: info@americanvisadc.com or avodc@aol.com www.americanvisadc.com

THIS IS NOT AN APPLICATION; IT IS ONLY A COVERING LETTER FOR AMERICAN VISA OF DC

ETHIOPIA

Visa Requirements Checklist:

- Original signed passport valid for six months with at least one blank visa page.
- One visa application forms signed and dated.
- One color passport sized photos 2" X 2" ONLY on white or very light background.
- Copy of flight itinerary from the travel agent or a copy of tickets.
- Letter of financial responsibility from the company in the USA (business visa).
- Invitation letter from host in Ethiopia addressed to: Embassy of Ethiopia, Washington DC (business visa).
- Pre-approval from host or sponsor issued by the Ethiopian Department of Immigration or Consular Department of the Ministry of Foreign Affairs. The pre-approval must be sent to the Embassy and a copy with the application (business visa).
- Copy of the Green Card (Non-USA Citizens).

Validity of Visas: Tourist and business visas' validity is determined by the consulate and at their discretion.

Jurisdiction: Residents of all states can be processed in Washington DC.

Contact Person's Name: _____ Phone and email: _____

SHIPPING INSTRUCTIONS: *Return completed process to:*

Company Name (If applicable): _____ Contact Name _____
 Address _____ Apt#/Mail Code _____
 City _____ State _____ Zip Code _____
 Phone # _____ Email Address _____

TRAVELER(S) INFORMATION:

Departure Date from U.S.A.: _____ **Need by this date:** _____ *Rush fees **will be** applied to meet this date **if necessary**

1) Last Name: _____ First Name _____

Passport #: _____ Passport Expires: _____ Date of Birth ____ / ____ / ____

2) Last Name: _____ First Name _____

Passport #: _____ Passport Expires: _____ Date of Birth ____ / ____ / ____

Processing Fees (check one):

Processing Time:	American Visa of DC Fee:	Embassy of Ethiopia Fee:	Money Order Fee:	Fed Ex Shipping Fee:	TOTAL:
8 -14 Business Days	\$55	\$70	\$25	\$30	\$180
4 -7 Business Days	\$95	\$70	\$25	\$30	\$220

I authorize American Visa of DC to charge my credit card for payment of passport/visa services.

Card holders' name _____ Number _____ Exp. Date: _____

Signature _____ Today's Date: _____

Check or Money Order made out to "American Visa of DC" for \$ _____ enclosed.

My company has a prearranged billing agreement.

American Visa of DC Inc. assumes no responsibility for the loss, damage or delay of passports or visas caused by an Embassy, Consulate, government office, postal or courier service, delivery service or travel agency. Requirements and fees relating to this request are subject to change without notice.



PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM. REQUEST NO.

FIRST NAME MIDDLE NAME LAST NAME

SEX MALE FEMALE DATE OF BIRTH *D*...../*M*...../*YY*..... COUNTRY OF BIRTH

CURRENT NATIONALITY ORIGINAL NATIONALITY (NATIONALITY AT BIRTH)

PASSPORT TYPE ORDINARY SERVICE DIPLOMATIC TRAVEL DOCUMENT OTHER

PASSPORT NUMBER ISSUE DATE *D*...../*M*...../*YY*..... EXPIRATION DATE *D*...../*M*...../*YY*.....

HOME/MAILING ADDRESS

CITY/TOWN STATE/REGION ZIP/POSTAL CODE COUNTRY

DAY TEL. EVENING TEL. FAX E-MAIL

CURRENT OCCUPATION

PURPOSE OF TRAVEL TOURISM/FAMILY VISIT BUSINESS OFFICIAL TRANSIT OTHER

DATE OF DEPARTURE FROM USA DATE OF ARRIVAL IN ETHIOPIA BORDER OF FIRST ENTRY

DURATION OF STAY IN ETHIOPIA ENTRIES: SINGLE DOUBLE MULTIPLE

ADDRESS IN ETHIOPIA HOTEL: HOTEL NAME
HOTEL TELEPHONE NUMBER

CONTACT PERSON IN ETHIOPIA
TELEPHONE NUMBER

FAMILY ACCOMMODATION: CITY REGION
ZONE K. KETEMA (WOREDA)
KEBELE HOUSE NO.
TELEPHONE

PHOTO

ATTACH ONE
PASSPORT SIZE
PHOTOGRAPH.

*WRITE YOUR NAME ON
THE BACK OF THE
PHOTOGRAPH.*

CHILDREN/DEPENDENTS ON THE SAME PASSPORT

FIRST NAME	MIDDLE NAME	LAST NAME	SEX	BIRTH DATE (D/M/YY)	BIRTH PLACE
1					
2					
3					
4					
5					

I, THE UNDERSIGNED, DECLARE THAT ALL THE ABOVE-MENTIONED STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE.

APPLICANT'S NAME APPLICANT'S SIGNATURE DATE

DO NOT WRITE IN THIS SPACE
FOR OFFICIAL USE ONLY/ TO BE FILLED IN AT HEAD OFFICE

VISA NUMBER VISA TYPE DATE OF ISSUE EXPIRATION DATE

PROCESSED BY NAME SIGNATURE DATE

APPROVED BY NAME SIGNATURE DATE