

Department of Foreign Affairs and Trade

APPLICATION FOR ENTRY PERMIT

INSTRUCTIONS					
1. Please read the notes on the re	ar of this form before		Date Received:	/ / By:	
completing the form. 2. A separate form is required for	entry to	File No:			
PNG who is travelling on their					
application is in respect of a ch parents must sign the applicati	age, both	Receipt:	ICD Clear: / /		
 Please write legibly or use a tylinguestions as fully as possible. 	di .	EPIS Registered on: / /			
The completed form and the ap	oplicant's passport sho	nould be Decision:		1 1	
sent to one of the addresses of	프로그램 : [4] 이 10 10 10 10 10 10 10 10 10 10 10 10 10		Applicant Notifi	ed on: / /	
CK THE PURPOSE AND CIRCLE	A DESCRIPTION OF Y	OUR VISIT T	O PNG:		
☐ Visitor		□ work	ing Resident		
Tourist - Tour Package Journalist		Businessperson/Investor		Short-term Employment	
Tourist - Own Itinerary Yachtsperson		Employment		Consultant/Specialist	
isiting Relative		Working I	Dependant	Dependant of Citizen	
Business		Stud	ent		
Short-term Multiple Entry		Formal Education		Occupational Trainee	
☐ Entertainer		D seco	ial Exemption	Melanesian Spearhead	
■ Entertainer Commerical:		Foreign O		Diplomat	
Film-maker Comedian	Musician		er/Volunteer	Researcher/Academic	
Charity:			er (Non-commercial)	Religious Worker	
Gospel Group Cu	Itural Exchange	Emergency Relief Work Medical		orker Sportsperson Domestic Worker	
HOW LONG DO YOU WISH TO S ERSONAL DETAILS:					
Family Name		Given Na	ames	±°	
Date of Birth	Sex	Marital Status			
		Marital	Status		
Day Month Year	Male Male			Married	
	Male Female		r Married	Married	
Country of Birth		☐ Neve	r Married		
Country of Birth	Female	☐ Neve	r Married		
	Female	☐ Neve	r Married	Divorced	
	Female Nationality	☐ Neve	er Married	Divorced	
	Female Nationality Expiry Date	☐ Neve	er Married	Divorced	
Passport Number	Female Nationality Expiry Date	Neve	owed Occupat	Divorced	
Passport Number	Female Nationality Expiry Date Day - Mo	Neve	owed Occupat	Divorced	
Passport Number Passport Issue Date Day Month Year	Female Nationality Expiry Date Day - Mo	Neve	owed Occupat	Divorced	
Passport Number Passport Issue Date Day Month Year RAVEL ARRANGEMENTS:	Expiry Date Day - Mo Passport Issuing	Neve	Occupation Passpor	Divorced tion t Issuing Authority	
Passport Number Passport Issue Date Day Month Year RAVEL ARRANGEMENTS:	Expiry Date Day . Mo Passport Issuing Departure Port an	Neve	Occupation Passpor	Divorced	
Passport Number Passport Issue Date Day Month Year RAVEL ARRANGEMENTS:	Passport Issuing Departure Port an Port:	Neve	Occupation Passport Arrival F Port:	Divorced tion t Issuing Authority	
Passport Number Passport Issue Date Day Month Year RAVEL ARRANGEMENTS: Name of Vessel/Flight	Expiry Date Day . Mo Passport Issuing Departure Port an	Neve	Occupa Passpor Arrival F Port: Date:	Divorced tion t Issuing Authority	

		For all other types of entry:									
Please attach copies of the following documents: A letter of offer of employment from your PNG sponsor.			How will you be funding your								
			stay in PNG?								
 The letter of approval of your work permit, including the work permit number, position number and expiry date. A certificate of good health from a registered doctor, a recent chest X- 				☐ Salary ☐ Company sponsor ☐ Own funds							
						ray, and the results of a recent HIV test.			Family		
						A statement of your goo	d character from your local pol	ice authorities.			
you have ever changed you	ır name, are known by an alias,	or own another na	seport ples	ase provide details:							
REVIOUS NAME/ALIAS DET	AILS:										
Family Name	Given Names	Date of Birth	Sex	Marital Status							
THER PASSPORTS: Country of Issue	Passport Number		Passport E	xpiry Date							
			#303,333,333,333,333,333,333,333,333,333								
RGANISATIONAL SPONSOR	R:			Market State of Con-							
Organisation Name		Agent									
Contact Address Number an	nd Street										
Suburb/Town		State/Province		Postcode							
Country	Busin	ess Telephone	Fa	csimile							
Country	Busine	ess Telephone	Fa (csimile							
Have you visited PNG before f yes, please give details of Date Pu	: Yes No No your last visit	ess Telephone		csimile) luring stay							
dave you visited PNG before f yes, please give details of	: Yes No No your last visit Irpose of visit Du	uration of visit									
Have you visited PNG before f yes, please give details of Date Pu Day Month Year Have you been convicted of	: Yes No No your last visit Impose of visit Du a criminal offence: Yes	uration of visit	Address	luring stay							
Have you visited PNG before f yes, please give details of Date Pu Day Month Year Have you been convicted of	: Yes No No your last visit Impose of visit Du	uration of visit	Address	luring stay							
Have you visited PNG before f yes, please give details of Date Pu Day Month Year Have you been convicted of f yes, please give details of	: Yes No your last visit prose of visit a criminal offence: Ye the date, nature of offence, pla	es No	Address o	luring stay							
Have you visited PNG before f yes, please give details of Date Pu Day Month Year Have you been convicted of f yes, please give details of	: Yes No No your last visit Impose of visit Du a criminal offence: Yes	es No	Address o	luring stay							
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DDRESSES:					
RESIDENTIAL: Number and Street					
Suburb/Town		State/Province	Postcode		
Country	Hom	e Telephone	Business Telephone		
PNG:					
Number and Street					
			Marine of States of State or party and		
Town/Village		Province			
Postal Address		Home Telephone	Business Telephone		
rustai Address					
MERGENCY CONTACT:					
Family name	Given Names		Relationship to Applicant		
railing frame		to the second relative via			
Contact Address Number and Stree	et				
Suburb/Town		State/Province	Postcode		
Country	Hom	e Telephone	Business Telephone		
)			
ECLARATION:					
ay signing this form. I		declare that the inform	ation provided on the form is tru		
y signing this form, I,	ed all information that r	nay be relevant to detern	ation provided on the form is tro nining whether I should be grant		
y signing this form, I,nd correct, and that I have disclose	ed all information that r	nay be relevant to detern	ation provided on the form is tru nining whether I should be grant		
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