

Bangladesh Visa Instructions for Asia Transpacific Journeys- Group Travelers

G3 Visas & Passports
3300 North Fairfax Dr., Ste 220
Arlington, VA 22201
Tel: (888) 883-8472, (703) 276-8472
Fax: (703) 524-3374
Email: info@g3visas.com

Please send the following to G3 Visas & Passports:

1. **Please submit your original valid and signed passport** (The passport must have at least one blank visa page for the visa and must be valid for 6 months from the end of your trip).
2. Non US Citizens must submit valid I-94 or a copy of your Alien Registration Card.
3. Two visa application forms completed and signed.
4. Three 2" x 2" passport size photographs.
5. Copy of flight itinerary from Asia Transpacific Journeys.

Please send this sheet with all fields completed; only one is required per family.

Contact and Shipping Information:

(Street Address Only, NO P.O. BOXES)

Name _____

Address _____

City _____

State _____

Zip Code _____

Tel # _____

Fax # _____

Date of Birth _____

Passport # _____

Date Departing US _____ / _____ / _____

Date Passport Needed _____ / _____ / _____

Email Address : _____

(We will email you the tracking number when your visas are complete.)

Shipping Fees:

All return shipping fees are included. Your passport will be returned via Federal Express. Federal Express cannot deliver to P.O. Boxes; please provide your home street address or work address.

Visa Information:

Visas will take three weeks to process.

One year multiple entry with 30 day stay

This visa is valid for 1 year from the date of issue

- Please submit an **expedite fee of \$40.00 per traveler** if you require your passport returned **in less than three weeks.**

Payment Information:

Since you will be traveling with a group, Asia Transpacific Journeys will be paying for the visa fees.

However, if you need us to process the visa in less than three weeks, you must pay the expedite fee. (Please include a check made payable to "G3 Visas & Passports, for the expedite fee).

- Please submit an **expedite fee of \$40.00 per traveler** if you require your passport returned **in less than three weeks.**

Expedite fee: Number of travelers x \$40.00 = \$_____

Group Traveler (GRP) Visa Information 9/2011

EMBASSY OF THE PEOPLE'S REPUBLIC OF BANGLADESH

3510, International Dr., NW

Washington, DC 20008

Visa Application for travel to Bangladesh: Form E

Please staple 2 (two)
recent passport size
equivalent photographs here

- Please type or print in the space provided after each item.

01. FULL NAME (First/Middle/Family) _____

02. PLACE OF BIRTH
(City/State/Country) _____

03. DATE OF BIRTH (dd /mm/yyyy) ____/____/____ 04. NATIONALITY _____

05. SEX : Male Female 06. MARITAL STATUS: Married Unmarried Divorced Widowed

07. PROFESSION _____

08. PASSPORT DETAILS: a) Number _____ b). Place of Issue _____

c) Date of Expiry (dd / mm / yyyy) _____

09. SPOUSE'S NAME : _____ NATIONALITY: _____

10. FATHER'S NAME : _____ NATIONALITY: _____

11. MOTHER'S NAME: _____ NATIONALITY: _____

12. CONTACT DETAILS WUC <

Home Address: _____

Tel: _____ Fax: _____

E-mail: _____

Business/Work Address: _____

Tel: _____ Fax: _____

E-mail: _____

13. ADDRESS OF THE EMPLOYER (if different from Above) with contact details:

14. PURPOSE OF VISIT (Tick appropriate box):

- Tourism (incl. tablig/visiting relatives, etc.) Business/Investment Seminar/Conference Defense related Cultural/Scientific Programme Missionary NGO Works Official
- Expert(s)/Worker(s)/Teacher(s)/Representative(s) in industrial/Education/Training Org./Sports/Artistic activities etc. Govt. contractual employment Study / Research Employment in UN/International Org.
- Journalist / Media (Print & Electronic) Others (Specify) _____

15. TYPE OF ENTRY: Single Multiple Double Transit

16. NAME AND ADDRESS OF PERSON (S), INSTITUTION OR COMPANY (where you can be contacted in Bangladesh)

17. ADDRESS WHILE IN BANGLADESH with contact details:

18. DATE OF ARRIVAL IN BANGLADESH _____ 19. INTENDED DURATION OF STAY _____

20. HAVE YOU EVER BEEN TO BANGLADESH Yes No

If yes, date and length of last visit

21. NAME OF PERSON (S) TRAVELLING WITH YOU AND RELATIONSHIPS:

22. ADDRESS OF PERSONS IF DIFFERENT FROM YOUR ADDRESS: _____

23. DECLARATION:

I declare that the all information above is true, accurate and complete to the best of my knowledge.

NAME _____ DATE ____/____/____ SIGNATURE _____
(dd / mm / yyyy)

Please ensure that you have answered items 1 through 23 and signed the declaration. An incomplete form will not be accepted.

FOR OFICIAL USE ONLY (Do not write in this space)

Date ____/____/____

Visa No. _____ Classification _____

Type: Single / Double/ Multiple / Transit

Date of Issue _____ Validity _____

Authorized Duration _____

Refused on _____ Reviewed by _____

Comments:

(Name and Designation of the Issuing Authority with seal)