



## EMBASSY OF GHANA

EGEBJERG ALLÉ 13, DK-2900 HELLERUP  
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### For Official Use

Visa No: \_\_\_\_\_  
Type of Visa: \_\_\_\_\_  
Date of Issue: \_\_\_\_\_  
Endorsed for: \_\_\_\_\_  
Charges: \_\_\_\_\_  
Signature of Issuing Officer: \_\_\_\_\_

Stick

Photo

Here

#### Instructions (also see attached guidelines)

1. This form must be completed in quadruplicate (4 copies) and in capital (block) letters and submitted together with 4 recent identical passport-size pictures and the appropriate visa fee at least fifteen (15) days before intended date of departure.
2. Full names and addresses, including telephone numbers of references in Ghana should be stated.
3. Any information subsequently found to be incorrect on this form may render the Entry Permit/Visa void.
4. Applications by post should be accompanied by self-addressed stamped envelopes, international stamp coupons or DKK 100.00 for return registered postage.
5. Applications for Business Visas should be supported by an invitation from counterpart in Ghana and a letter of guarantee from the sponsor of the trip.
6. All consular and visa fees can be paid into Danske Bank Swift DABADKKK – DK 3530003109114847. Applicants must pay all charges both domestic and foreign.
7. FOREIGN CHEQUES DRAWN ON DANSKE BANK ATTRACT A BANK CHARGE. CONTACT THE BANK FOR CURRENT RATE.\*

Please Indicate  
Fee Code \*



(\*) Mandatory fields **Every field is mandatory: Applicants will be requested to re-submit new applications for wrong information and Blank Spaces.**

#### Section 1

a) Surname:*	b) First Name(s):*
c) Previous Name (if applicable):	d) Nationality:*
e) Date & Place of Birth:*	f) Email:

#### Section 2

a) Passport No.:	b) Date of Issue: (dd-mmm-yyyy)	c) Date of Expiry: (dd-mmm-yyyy)
d) Place of Issue:	e) Former Nationality (if any):	

#### Section 3

a) Profession/Occupation:*	b) Workplace/School Address:*	c) Tel. No.:
d) Country of Current residence:*	e) Residential Address:*	f) Tel. No.:

#### Section 4

a) Intended date of travel to Ghana: (dd-mmm-yyyy)	b) Means of Travel: Air <input type="checkbox"/> Sea <input type="checkbox"/> Land <input type="checkbox"/>	c) Financial Means at Applicant's Disposal:
d) Is applicant in possession of a return ticket? Yes <input type="checkbox"/> No <input type="checkbox"/>	e) If Yes, provide Ticket No.:	f) Date of Last Visit to Ghana: (dd-mmm-yyyy)
g) Purpose of Journey:		
h) Type of Visa: i) Single Entry Visa <input type="checkbox"/> ii) Multiple Entry Visa <input type="checkbox"/>		iii) Duration of Stay in Ghana:

#### Section 5

1st Reference in Ghana a) Full Name:*	b) House Number / Street Address:*	d) Tel No.:
	c) P.O. Box Address:*	
2nd Reference in Ghana a) Full Name:*	b) House Number / Street Address:*	d) Tel No.:
	c) P.O. Box Address:*	

#### Section 6. Please fill this section if sharing a passport, and traveling together.

Accompanied by: Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
(dd-mmm-yyyy)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(dd-mmm-yyyy)

Please note that **UNSIGNED** visa application forms will be considered as **INCOMPLETE** and will cause the application to be **REJECTED**.

(\*) Applicants transferring money should be aware of current bank charges. Contact bank for more information.



#### Check List

- ☐ 1. Original Passport
- ☐ 2. 4 completed application forms
- ☐ 3. 4 recent passport pictures
- ☐ 4. Self Addressed Envelop
- ☐ 5. Receipt of Payment (Visa fee) 9
- Business Visa applicant should include:**
- ☐ 6. Invitation Letter
- ☐ 7. Guarantee/Introduction Letter