

## AMERICAN VISA OF DC

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

## SUDAN

### Visa Requirements:

- Original signed passport valid for six months with at least one blank visa page.
- One visa application form completed and signed.
- One color passport sized photo 2" X 2" ONLY on white background.
- Letter of financial responsibility from the company in the USA (business visa).
- Invitation from the organization in Sudan (mission/volunteer visa).
- Copy of flight itinerary and hotel confirmation (tourist visa).
- An approval from Ministry of Foreign Affairs with reference # (business or tourist visa)
- Copy of the Green Card (For Non-U.S. Citizens).

**Validity of Visas:** Tourist and business visas' validity is for stays of up to 30 days.

**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: (please check one)**

Processing Time:	American Visa of DC Fee:	Sudan Embassy Fee	Money Order Fee	Fed Ex Shipping Fee	TOTAL
15 - 20 Bus. days (w/out approval):	\$95	\$154	\$25	\$35	\$309
10 - 14 Bus. days (w/out approval):	\$125	\$154	\$25	\$35	\$339
1 - 2 Business days (w/approval):	\$150	\$154	\$25	\$35	\$364

- Please add \$15 service fee for all Non-U.S. citizens, and the Embassy fee may vary.

### **PAYMENT:** (check one)

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

Card holders' name \_\_\_\_\_ Number \_\_\_\_\_ Exp. Date: \_\_\_\_\_

CVV: \_\_\_\_\_ 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. All service fees and Embassy Fees are NON-REFUNDABLE and not dependent on the visa being issued or declined. Requirements and fees relating to this request are subject to change without notice.



## Application for Visa

Telephone (home): ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

Telephone (work): ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

Full Name: \_\_\_\_\_

Sex: M \_\_\_\_ F \_\_\_\_

Nationality: \_\_\_\_\_

Occupation: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Present Address: \_\_\_\_\_

\_\_\_\_\_

Address in Sudan: \_\_\_\_\_

\_\_\_\_\_

Destination(s) in Sudan: \_\_\_\_\_

Period of stay: \_\_\_\_\_

Purpose of visit: \_\_\_\_\_

\_\_\_\_\_

Date of arrival in Sudan: \_\_\_\_\_

Passport number: \_\_\_\_\_

Place of issue: \_\_\_\_\_

Date of issue: \_\_\_\_\_

Valid until: \_\_\_\_\_

**Names and complete addresses of 2 references in Sudan**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Duration of previous residence in Sudan and last address before leaving Sudan:**

\_\_\_\_\_

\_\_\_\_\_

**Name of country (other than Sudan) for which applicant holds a valid permit to enter:**

\_\_\_\_\_

**Names of children under sixteen (16) year accompanying the applicant:**

<b>Name:</b>	<b>Age:</b>	<b>Sex:</b>
_____	_____	M _____ F _____
_____	_____	M _____ F _____
_____	_____	M _____ F _____

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Place and Date

**PHOTO**

**For Official Use Only**

Approved by: \_\_\_\_\_

Receipt #:

Date Received: