



PLEASE ENTER ALL INFORMATION IN-LINE, PRINT AND RETURN TO CONSULATE

The Royal Embassy of Cambodia to the United States of America

4500 16th Street NW, Washington D.C. 20011

Telephone: (202) 726-7742 or FAX: (202) 726-8381

Please submit 3 copies with 3 photos

Place
Photo
Here

Last Name:		Present Occupation:		
First Name:		Place of Work:		
Middle Name:				
Birth Place:		Permanent Address in the U.S.A.:		
Date of Birth (Day/Month/Year):				
Sex: M F		Purpose of Visit to the Kingdom of Cambodia: Tourism Journalism Official Guest Business Other Mission: _____		
Nationality:				
Date of Entry:				
Date of Departure:				
Point of Entry:		Point of Exit:		
Means of Transportation:		Means of Transportation:		
Address During Visit:		Organizations, Persons to be Visited:		
Passport Number:		Type: N	Previous Arrivals in	
Place of Issue:		S	Cambodia	
Date of Issue:		D	(Mention dates of arrival, period	
Date of Expiration:		of stays, purposes and locations)		
	Surname:	First Name, Middle:	Date of Birth:	Permanent Address:
Children under 13 years travelling with you:	_____	_____	_____	_____
Relatives in the Kingdom of Cambodia:	_____	_____	_____	_____

Signature _____ **Date** _____
(Please Print Then Sign)

Visa Number _____	Date Issued _____
Expiration Date _____	