

CONSULATE OF CHILE IN SINGAPORE
VISA APPLICATION FORM
 Application Fee S\$16.00 (non-refundable)

1. SURNAME (As shown in your passport)		2. FIRST AND MIDDLE NAME (As shown in your passport)		
3. ALIAS : (other names)				
4. FATHER'S SURNAME		5. MOTHER'S SURNAME		
6. SEX: MALE / FEMALE		7. DATE OF BIRTH (day/month/year)		
8. PLACE OF BIRTH (City, Province, Country)		9. LOCAL DOCUMENT TYPE AND NO.		
10. NATIONALITY (Country of Origin)		11. ADDRESS OF RESIDENCE		12. TEL. No. (Home)
13. PROFESSION		14. MARITAL STATUS (Married/Single/Divorced/Separated/Engaged)		15. NATURE OF BUSINESS
16. EMPLOYER			17. BUSINESS TEL NO.	
18. COLOR OF HAIR	19. COLOR OF EYES	20. COMPLEXION	21. HEIGHT	22. PARTICULAR OF FEATURE
23. PASSPORT NO./TRAVEL DOCUMENT		24. PLACE AND DATE OF ISSUE		25. EXPIRATION DATE
26. TYPE OF VISA (Single / Multiple)		27. REASON OF VISIT TO CHILE		28. LENGTH OF STAY
29. PARTICULARS OF SPONSOR (Full Name /Address and Phone No.)				
30. ARRIVAL DATE	31. ADDRESS IN CHILE (Lodging Place)			32. DEPARTURE DATE
33. SPOUSE (Name, Nationality, Date of birth)				
34. CHILDREN (Names, Nationality, Date of birth)				
35. HAVE YOU APPLIED FOR VISA BEFORE (YES / NO)		36. WHEN? : YEAR		37. WHERE?
38. DID YOU ENTER? YES / NO		39. WHEN? YEAR	40. LENGTH OF STAY	41. REASON
42. ANY FAMILY MEMBERS IN CHILE? (Spouse Finnee/Fiancee Brother/Sisters)				
43. LIST THE COUNTRIES WHERE YOU HAVE LIVED MORE THAN SIX MONTHS ALONG THE LAST 5 YEARS COMMENCING FROM YOUR CURRENT RESIDENCE.				
AFFIDAVIT: I declare that I am aware that during my stay in Chile I may not carry out gainful activities nor intervene in its internal policy or in acts against its Political Constitution or the Laws, Decrees and other provisions applicable in its territory and promise, during my stay in Chile NOT to apply for a change of my status of tourist. I further declare that all the particulars contained in this Application are true.				
..... DATE	 APPLICANT'S SIGNATURE		