

Ministry of Home Affairs and Immigration

Vision

Population register and migration management that is rated amongst the best in the world.

Mission

To manage the national population register and facilitate lawful migration.

For more information and queries contact us at the following address:

Information Centre Tel: (061) 2922201 / 2922204 / 2922113 Fax: (061) 2922112

E-mail: information@mha.gov.na



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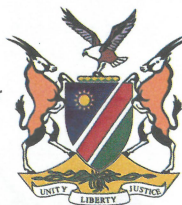
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IMPORTANT

To be completed in block letters

The permission of the Ministry of Home Affairs
& Immigration must be obtained before:

- A) The purpose and period of residence may be changed; or
B) Employment is accepted; or
C) Employment/employer may be changed; or
D) Study offer is accepted; or
E) Learning institution is changed.



Immigration Control Act 7 of 1993

Arrival Form

(Section 8 & 29 Regulation 2)

Departure From Namibia Regulation Act 1993

(Act 34 of 1993)

Departure Form

(Section 9A/Regulation 3)

ARRIVAL / DEPARTURE FORM**DEPARTING PASSENGERS ANSWER ONLY QUESTION 1-14.****ARRIVING PASSENGERS, PLEASE ANSWER QUESTIONS 1-19. DO NOT FORGET SIGNATURE AND DATE.**

1. Surname (Family name):	2. First Name (s):
3. Maiden Name	
4. Sex (tick): Male ☐ Female ☐	5. Date of Birth: Day Month Year
6. Country of Birth (State country):	7. Country of present residence:
8. Nationality of passport:	9. Passport Number:
10. Passport Expiry Date: Day Month Year	
11. Number of accompanying children under the age of 16: Male ☐ Female ☐	
12. Mode of Travel (Please tick one box):	
Air ☐ Flight No	13. Occupation:
Road ☐ Reg No	Sea ☐ Name of Vessel
Rail ☐ Other ☐ Specify:	

14. Physical Address in Namibia:	
15. Purpose of Entry (Tick one box):	
Namibian Citizen ☐	PRP Holder ☐ Visiting Friends/Relatives ☐ Holiday/Tourist/Recreation ☐
In Transit/Stopover ☐	Diplomat ☐ Business/Conference/Professional ☐ ORP, EP & SP Holders ☐
Other (Please specify):	
16. Length and intended stay in Namibia: Days/Weeks/Months	
17. Visitors to Namibia, kindly state the amount of money you intend to spend during your visit (excluding fare to and from Namibia):	
18. Contact Person	19. Contact Number

I declare that the above information is correct to the best of my knowledge.

Signature: Date:

Official use only (Date Stamp)	Signature of Immigration Officer

VISA NUMBER:	Number of days granted:
VISA TYPE:	
OFFICE OF ISSUE:	

N PRP T, ST T/S B, C, P D O SERIAL NO: A