

Madagascar Official visa Application



IMPORTANT: Please enter your contact information

Name:

E-mail:

Tel:

Mobile:

The latest date you need your passport returned in time for your travel:



Madagascar official visa checklist

- Filled out and signed Madagascar official visa application form.** The form is enclosed.
- Original passport.** Passport must have at least 6 months remaining validity and have at least 1 visa page.
- 1 Photographs.** Standard passport photographs 2 x 2 inches on white background.
- Payment.** Credit Card Authorization form, Certified Check, or Money Order payable to VisaHQ.com.
- Return mailer.** Prepaid self-addressed return label or payment for FedEx.

! If you wish to prepay return shipping, please add the shipping fee to the total and provide the return shipping address:

- FedEx 2nd day delivery - add \$15
- FedEx Standard Overnight - add \$20
- FedEx Priority Overnight - add \$25
- FedEx Saturday delivery - add \$45
- FedEx First Overnight - add \$65

Name:

Company:

Address:

City:

State:

Zip:

- State Department Letter.** A letter from the US Department of State, sending department, or agency, addressed to "Embassy of Madagascar, Washington D.C.", explaining purpose of travel and dates of the trip. Letter must contain the applicant's name and the passport number.

Madagascar official visa fees for citizens of United States

Type of visa	Max. validity	Embassy fee	Our fee	Processing time	Total
Diplomatic	up to 30 days	\$0.00	\$44.95	4 business days	\$44.95

Credit Card Authorization Form

I authorize VisaHQ.com to charge my credit card for the amount of \$

Name on the Credit Card:

Credit Card number: - - - Exp. date: /

Credit Card Billing Address:

Signature:

Comments:

Thank you!
We accept all major credit cards.



REPOBLIKAN ' i MADAGASIKARA
Tanindrazana - Fahafahana - Fahamarinana

NOM de FAMILLE: (Last name)	Veuillez collez ici votre photographie (Please affix your photograph here)
NOM DE JEUNE FILLE: (Maiden Name)	
PRÉNOMS: (First and Middle Name)	
NÉ LE: (Date of Birth)	
NÉ À: (Place of Birth)	

NATIONALITÉ: (Present nationality)	NATIONALITÉ D'ORIGINE: (Previous nationality)
SITUATION DE FAMILLE: (Family Status)	
DOMICILE HABITUEL: (Home address)	
RÉSIDANT ACTUELLEMENT À: (Present address)	
PROFESSION OU QUALITÉ: (Occupation or title)	
SPÉCIALISATION ÉVENTUELLE: (Present specialization)	
TITRE SCIENTIFIQUES: (Scientific qualifications)	

NUMÉRO DE PASSEPORT (Passport Number)
DÉLIVRÉ LE: (Date of issue)
DÉLIVRÉ PAR: (Issued by)
VALABLE JUSQU'AU: (Valid until)

NATURE ET DURÉE DU VISA SOLLICITÉ (Type and Length of Request Visa)				
TRANSIT À DESTINATION DE (Country to which proceeding)				
ALLER-RETOUR AVEC ARRÊT DE	JOURS (days)			
COURT SEJOUR DE (Short stay for)	JOURS (days)			
VALABLE DU: (Valid from)	AU: (To)			
NOMBRE D'ENTRÉE (Number of Entries)	UNE one	DEUX two		
MOTIF DU VOYAGE (Reason for trip)	TOURISME tourism	AFFAIRES business	CONGRES convention	ETUDES studies

EMPLACEMENT RESERVE A L'ADMINISTRATION (For official use only)
Nom:
Prénoms:
No. du visa:
Date de délivrance:
Délai d'utilisation:
Durée du séjour autorisée:
.....
Nombre d'entrées autorisées:
.....
Référence de l'autorisation:
.....
.....

Visas can be issued only when application form is completely filled out and sig and signed. For further information call (858) 792-6999 or write to

Honorary Consulate of Madagascar, 1318 Santa Luisa Drive, Solana Beach, CA 92075

No documents submitted with visa application can be returned, except passport, health certificates, checks and travel tickets.

Visa fees are payable to the Consulate of Madagascar.

NOMS ET PRÉNOMS DES MEMBRES DE VOTRE FAMILLE VOYAGEANT AVEC VOUS: (Names of relatives traveling with you)	
S'IL S'AGIT D'UN VOYAGE D'AFFAIRES, INDIQUEZ LES NOMS ET ADRESSES DES COMMERCANTS OU INDUSTRIELS QUE VOUS DESIREZ RENCONTRER: (If you are traveling on business, please give names and addresses of correspondents or businessmen you wish to contact.	
S'IL S'AGIT D'UNE PARTICIPATION À UN CONGRES OU MANIFESTATION, INDIQUEZ L'ORGANISATEUR, LE LIEU, LA DATE, LA DURÉE: (If you are traveling to attend a convention or meeting, please indicate the name of the organizing party, the date and the length	
S'IL S'AGIT D'ÉTUDES UNIVERSITAIRES OU STAGES TECHNIQUES, INDIQUEZ ÉTABLISSEMENTS FRÉQUENTÉS, LIEUX, DATES, DURÉES: (If you intend to take up studies or technical training, give names of institutions, addresses, dates and length)	
AVEZ-VOUS DÉJÀ HABITÉ MADAGASCAR PENDANT PLUS DE TROIS CONSÉCUTIFS? PRÉCISEZ À QUELLE DATE ET OÙ: Have you ever lived in Madagascar for more than three months? Please give date and place.	
NOMS ET ADRESSES EXACTES DES RÉFÉRENCES DAND LE PAYS DE RÉSIDENCE: (Names and addresses of References in your country)	
ATTACHES FAMILIALES OU RÉFÉRENCES DAND LE PAYS DE RÉSIDENCE: (Names and Addresses of relatives or references in Madagascar)	
INDICATION PRÉCISE DES LIEU ET DATE (specify place and date of)	
D'ENTRÉE A MADAGASCAR (entry into Madagascar)	DE SORTIE DE MADAGASCAR (departure from Madagsacar)
MOYEN DE TRANSPORT UTILISÉ: (Means of transportation)	
INDICATION DE VOS ADRESSES ET CONDITION DE VOTRE HÉBERGEMENT PENDANT VOTRE SÉJOUR À MADAGASCAR: (Please give your addresses and housing arrangements during your stay in Madagascar)	

IMPORTANT:

JE M'ENGAGE À N'ACCEPTER AUCUN EMPLOI RÉMUNÉRÉ OU AU PAIR DURANT MON SÉJOUR À MADAGASCAR, À NE PAS CHERCHER À M'Y INSTALLER DÉFINITIVEMENT ET À QUITTER LE TERRITOIRE MALGACHE À L'EXPIRATION DU VISA QUI ME SERA ÉVENTUELLEMENT ACCORDÉ

(I agree to accept no paid or -au pair- position during my stay in Madagascar, not to try to settle down definitively in the country, and to leave the Malagasy territory upon the expiration of my visa).

MA SIGNATURE ENGAGE MA RESPNSABILITÉ ET M'EXPOSE, EN SUS DES POURSUITES PRÉVUES PAR LA LOI EN CAS DE FAUSSE DÉCLARATION, À ME VOIR REFUSER TOUT VISA À L'AVENIR

(My signature renders me responsible for the above statements; in case of any falsification therein, I understand that, in addition to any penalties imposed by Law, I would be unable in the future to receive any Malagasy visa).

À _____ LE _____
 (Place) (Date)

AVIS DU CHEF DE POSTE: (For official use only)
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SIGNATURE _____
 (Signed)