

CONSULAT DU BURKINA FASO DE NICE
Unité – Progrès – Justice



Photo
3,5 x 4,5 cm

Reserved for Administration

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APPLICATION FORM FOR VISAS OF RESIDENCE IN BURKINA FASO
In block letters

Applicant

(* compulsory mention)

Surname*: Maiden name:
First names*:
Nationality*:
Date of birth*: Place of birth*:
(DD/MM/YYYY)
Current address*:
.....
.....
Marital status*:
Occupation*:
Phone number: Cellular:
Mail :

Passport

Number*: Issued on*:
(DD/MM/YYYY)
Issued by*: Valid until*:
(DD/MM/YYYY)

Visa

Length of visa*:
Date of entry*: Date of exit*:
(DD/MM/YYYY) (DD/MM/YYYY)
Number of entries requested*:
Address in Burkina Faso:
.....
Purpose of travel:
City of entry:
Means of transport:
Children, when accompanying the applicant:
Surnames, first name and birth dates:

For a receipt, check this box:

Signature* :

I hereby certify my responsibility as well as of my family and exposes us, in addition to any penalties imposed by law for false statement, to see ourselves refuse any visa in the future.