

ROYAL EMBASSY OF CAMBODIA
TO THE UNITED STATES OF AMERICA
4530 16th Street N.W.
Washington D.C. 20011
202-7267742 www.embassyofcambodiadc.org
9:00am - 12:00pm / 1:00 - 4:00pm Monday to Friday

KINGDOM OF CAMBODIA
Nation – Religion - King



VISA APPLICATION FORM

(*) required information

Purpose of Visit*

☐ Tourist ☐ Business ☐ Khmer
☐ Other (Please Specify) _____

2 x 2
One (1) Passport picture

Recent at least
six (6) months

Securely Attached
Paste or Stapled
L/R (side-to-side)

Last Name: *

First Name: *

Gender: * ☐ Male ☐ Female

Date of Birth * Day _____ Month _____ Year _____

Place of Birth *

Birth Nationality *

Present Nationality: *

Passport Number: *

Place of Issue: *

Date Issued: *

Date Expire: *

Present Occupation: _____

Company: _____

Current Home Address: * _____

Mobile Phone: * _____

Home Phone: * _____

Email Address: * _____

Point of Entry: * _____

Means of Transportation: * _____

Address during the visit: * _____

Point of Exit: * _____

Means of Transportation: * _____

Arrival Date in Cambodia* Jan - Feb - Mar - Apr
May - Jun - Jul - Aug
Sep - Oct - Nov - Dec
Day _____ Month _____ Year _____

Exit Date in Cambodia* Jan - Feb - Mar - Apr
May - Jun - Jul - Aug
Sep - Oct - Nov - Dec
Day _____ Month _____ Year _____

First trip to Cambodia: ☐ Yes ☐ No

Travelling on group tour: ☐ Yes ☐ No

Tour Company: * _____

FOR MAILING VISA REQUEST

Send it to:

Royal Embassy of Cambodia (Visa Application)

4530 16th Street N.W.

Washington D.C. 20011

Please send it through USPS – Priority Mail Envelope –
with TRACKING NUMBER.

For (send back) INSERT PREPAID USPS return self-address
PRIORITY MAIL envelope with a TRACKING NUMBER (recommended).

For FedEx & UPS return, insert official receipt that billed to your account
or credit card. Don't put Embassy as the sender.

TOURIST VISA REQUIREMENTS

- Completely filled-up **VISA Application Form** (one copy)
- One (1) piece of **2x2 Passport picture** (recent six (6) months)
- **Visa Fee** (Bank/Cashier Cheque or Money Order) in **USD**
 - Payable to **Embassy of Cambodia**
- **ACTUAL PASSPORT (REQUIRED)**
 - **Valid at least six (6) months** upon entering Cambodia
 - At least two (2) available Passport pages for Visa sticker and date stamps

202002

FOR OFFICIAL USE ONLY:

I hereby declare that all information on this form are true and correct.

DATE PROCESSED _____

VISA NUMBER _____

TYPE OF VISA _____

Signature over Printed Name & Date Signed

[Signature]

PICK-UP SLIP	DATE REC'D: _____	DATE PICK-UP: _____
PASSPORT NAME/S: _____	PP COUNT: _____	
REMARKS: _____		
REC'D BY: _____		

Royal Embassy of Cambodia 4530 16th St. N.W. Washington DC 20011 202-7267742
Bring valid Photo ID when you pick-up Pickup time: 9am - 12 pm / 1-3 pm Monday to Friday

PICK-UP SLIP	DATE REC'D: _____	DATE PICK-UP: _____
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