



CONSULADO GENERAL DE GUATEMALA
 57 PARK AVENUE
 NEW YORK, N. Y. 10018

No. _____

APLICACION FOR TURIST VISA

a) First name:	Last name:
b) Place and date of birth:	
c) Nationality:	
d) Occupation:	
e) Marital Status:	f) Sex: F _____ M _____
g) Parents name:	
h) Monthly income:	
i) Passport No.	Date of issuance:
j) Place of issuance:	
k) Address in Guatemala:	
l) Permanent address and telephone number:	
m) Work address and telephone number:	

a) Do you have relatives or friends in Guatemala ?
b) Purpose of your trip:
c) Date of your trip:
d) How long will you stay in Guatemala ?
e) Have you visited Guatemala before ?

ATTACH THE FOLLOWING DOCUMENTS:

a) International Credit Card, Bank Statement or Traveller's Checks:
b) Affidavit of your contact in Guatemala:
c) Letter of recommendation
d) Round Trip Ticket by: air, sea or land:
e) Employer's letter:

Signature: _____

Date: _____

Vo.Bo.: _____