

Photo



ROYAL CONSULATE GENERAL
OF SAUDI ARABIA

Full name: _____ الاسم الكامل:
Mother's name: _____ إسم الأم:
Date of birth: _____ تاريخ الولادة: Place of birth: _____ محل الولادة:
Previous nationality: _____ الجنسية السابقة: Present Nationality: _____ الجنسية الحالية:
Sex: Female أنثى Male ذكر Marital Status: _____ الحالة الاجتماعية:
Religion: _____ الديانة:
Place of issue: _____ مصدره: Qualification: _____ المؤهل العلمي: Profession: _____ المهنة:
Home address and telephone No.: _____ عنوان المنزل ورقم التلفون:
Business address and telephone No.: _____ عنوان الشركة (المؤسسة) ورقم التلفون:

Purpose of travel: عمل Work مرور Transit زيارة Visit عمرة Umrah للأقامة Residence حج Hajj دبلوماسية Diplomacy الغاية من السفر:
Place of issue: _____ محل الإصدار: Date passport issued: _____ تاريخ الإصدار: Passport No.: _____ رقم الجواز:
Date of passport's expiry: _____ تاريخ انتهاء صلاحية الجواز:
Duration of stay in the Kingdom: _____ مدة الإقامة بالمملكة: Date of arrival: _____ تاريخ الوصول: Date of departure: _____ تاريخ المغادرة:
Mode of Payment: () Free () Cash () Cheque No. _____ تاريخ: _____ طريقة الدفع: _____ بشيك رقم: _____ نقداً _____ مجاملة _____ تاريخ:
Relationship: _____ صلته: اسم المحرم:
Destination: _____ جهة الوصول بالمملكة: Carrier's name: _____ اسم الشركة الناقلة:

Dependents traveling in the same passport: _____ إيضاحات تخص أفراد العائلة (المضافين) على نفس جواز السفر:

نوع الصلة Relationship	تاريخ الميلاد Date of Birth	الجنس Sex	الاسم بالكامل Full name

Name and address of company or individual in the kingdom: _____ اسم وعنوان الشركة أو اسم الشخص وعنوانه بالمملكة:

The undersigned hereby certify that all the information I have provided are correct. I will abide by the laws of the Kingdom during the period of my residence in it. أنا الموقع أدناه أقر بأن كل المعلومات التي دونتها صحيحة وسأكون ملتزماً بقوانين المملكة أثناء فترة وجودي بها.

Date: _____ التاريخ: Signature: _____ التوقيع: Name: _____ الاسم:

For official use only: _____ للاستعمال الرسمي فقط:
Date: _____ تاريخه: Authorization: _____ رقم الامر المعتمد عليه في اعطاء التأشيرة:
Visit / Work for: _____ لزيارة - العمل لدى:
Date: _____ التاريخ: Visa No.: _____ أشر له برقم:
FEE COLLECTED: _____ المدتها: Type: _____ المبلغ المحصل: Duration: _____ مدتها:
القنصل العام
Consul General
مدقق البيانات
Checked by:



القنصلية العامة للمملكة العربية السعودية
نيويورك

**Royal Consulate General of Saudi Arabia
New York**

NOTICE ON SAUDI LAWS AND REGULATIONS

I hereby undertake to give my fingerprints and my eye iris pattern images and comply with the laws of the Kingdom of Saudi Arabia.

I, the undersigned, hereby agree to have my fingerprint and iris data (biometrics) captured as part of the application procedure for an entry visa to the Kingdom of Saudi Arabia. I further agree and declare as follows:

1. If granted the visa, I shall abide by all the laws and regulations of the Kingdom of Saudi Arabia and respect the Islamic customs and traditions of its people;
2. I am aware that all alcoholic beverages, narcotics and other illegal drugs, pornographic materials or publications that violate the social norms of decency and all other publications that are disrespectful of any religious belief or political orientation are prohibited and shall not be brought into the Kingdom of Saudi Arabia;
3. I am also fully aware that the crime of smuggling narcotics and other illegal drugs into the Kingdom of Saudi Arabia is punishable by the death penalty;
4. I have never been removed, excluded or deported from the Kingdom of Saudi Arabia or from any other Gulf Cooperation Council member state or charged with violation of any law or regulation thereof;
5. I agree to depart the Kingdom of Saudi Arabia on or before the expiration date of my visa. I am well aware that any violation of the laws and regulations of the Kingdom or any engagement in prohibited activities, such as the activities mentioned herein or in the entry visa documentation, are subject to the penalties described in the "Dealing with Persons on Entry Visas" statute, as enacted by Royal Decree No. 42, dated 10/18/1404 H;
6. I acknowledge and reaffirm my declaration that this application and the evidence submitted with it are all true and correct. I also understand that if I submit any false information or if my name was found to be listed as banned from entry into the Kingdom of Saudi Arabia, my application will be denied or my visa, if already granted, revoked. Moreover, I may be turned back from any Saudi port of entry at my own expense, while I shall have no right to demand compensation.

Name (Please print): _____

Signature: _____

Date: _____