# IRELAND DOCUMENT PREPARATIONSERVICE

Only complete this Document Preparation Request if you would like CIBTvisas to complete your visa application.

1. We will need to have your full application submitted together with this Document Preparation Service Request in order to cross check information.
2. Every question needs to be answered to avoid delays in your visa application.

## VISA INFORMATION

TYPE OF VISA

Short Stay (up to 90 days) Long Stay (more than 90 days)

NUMBER OF ENTRIES

Single Multiple

REASON OF TRAVEL (PLEASE CHOOSE ONE OF THE BELOW)

Select one

PURPOSE OF TRAVEL, IF "OTHER"

PASSPORT TYPE

Original Diplomatic Government Travel document

PASSPORT NUMBER

DATE OF ENTRY mm/dd/yyyy

DATE OF DEPARTURE mm/dd/yyyy

## PERSONAL DETAILS

LAST NAME

FIRST NAMES

OTHER NAMES

GENDER

Male Female

COUNTRY OF BIRTH

COUNTRY OF NATIONALITY

ADDRESS

CURRENT LOCATION

PHONE NUMBER

EMAIL ADDRESS

LENGTH OF RESIDENCE IN PRESENT COUNTRY

DO YOU HAVE PERMISSION TO RETURN TO THAT COUNTRY AFTER YOU STAY IN IRELAND?

No Yes

HAVE YOU APPLIED FOR AN IRISH VISA BEFORE?

No Yes

IF YES PLEASE PROVIDE YOUR RESIDENCE PERMIT NUMBER

HAVE YOU EVER BEEN REFUSED BEFORE?

No Yes (If yes, please provide location of application or reference number)

HAVE YOU EVER BEEN IN IRELAND BEFORE?

NO YES (IF YES PLEASE ANSWER THE BELOW)

PURPOSE OF TRIP

DEPARTMENT OF JUSTICE NUMBER

GNIB NUMBER

PPS NUMBER (IF ANY)

DO YOU HAVE FAMILY MEMBERS LIVING IN IRELAND?

No Yes (if yes please answer the below)

LAST NAME

FIRST NAMES

DATE OF BIRTH DD/MM/YYYY

RELATION TO YOU

DEPARTMENT OF JUSTICE NUMBER OF FAMILY MEMBER

HAVE YOU EVER BEEN REFUSED PERMISSION TO ENTER IRELAND BEFORE?

No Yes (If yes, please provide details)

HAVE YOU EVER BEEN NOTIFIED OF A DEPORTATION ORDER TO LEAVE IRELAND?

No Yes (If yes, please provide details)

HAVE YOU EVER BEEN REFUSED A VISA TO ANOTHER COUNTRY?

No Yes (If yes, please provide details)

HAVE YOU EVER BEEN REFUSED ENTRY TO OR DEPORTED FROM ANOTHER COUNTRY?

No Yes (If yes, please provide details)

DO YOU HAVE ANY CONVICTIONS IN ANY COUNTRY?

No Yes (if yes please answer the below)

WHAT WHERE YOU CONVICTED FOR?

WHEN AND WHERE WERE YOU CONVICTED?

WHAT WAS YOUR SENTENCE?

## PASSPORT INFORMATION

ISSUING AUTHORITY OF PASSPORT

DATE OF ISSUE mm/dd/yyyy

DATE OF EXPIRY mm/dd/yyyy

WAS THIS YOUR FIRST PASSPORT?

Yes No (if no please answer the below)

PASSPORT NUMBER OF PREVIOUS PASSPORT

DATE OF ISSUE

DATE OF EXPIRY

ISSUING AUTHORITY

ARE YOU CURRENTLY EMPLOYED IN YOUR COUNTRY OF RESIDENCE?

No Yes (if yes please answer the below)

## EMPLOYMENT AND EDUCATIONAL HISTORY

CURRENT EMPLOYER

DURATION OF EMPLOYMENT

ADDRESS

PHONE NUMBER

EMAIL ADDRESS

ARE YOU CURRENTLY A STUDENT IN YOUR COUNTRY OF RESIDENCE?

No Yes (if yes please answer the below)

NAME OF SCHOOL OR COLLEGE

ADDRESS

PHONE NUMBER

EMAIL ADDRESS

WILL YOU BE TRAVELLING WITH ANY OTHER PERSON?

NAME

RELATIONSHIP

NAME

RELATIONSHIP

NAME

RELATIONSHIP

## CONTACT DETAILS FOR CONTACT/HOST IRELAND

(IF YOU HAVE NO PERSONAL CONTACT/HOST PLEASE GIVE ACCOMMODATION NAME AND ADDRESS)

ADDRESS OF CONTACT PERSON IN IRELAND

PHONE NUMBER

DO YOU KNOW THIS PERSON PERSONALLY?

No Yes (if yes please answer the below)

FULL NAME

NATIONALITY

OCCUPATION

RELATIONSHIP

## FAMILY INFORMATION

MARITAL STATUS

Single Married Widowed Divorced Unmarried partnership

IF YOU ARE MARRIED OR IN AN UNMARRIED PARTNERSHIP, PLEASE COMPLETE THE BELOW QUESTIONS

LAST NAME

FIRST NAMES

DATE OF BIRTH DD/MM/YYYY

PASSPORT NUMBER

GENDER

Male Female

IN WHAT COUNTRY DOES YOUR SPOUSE/PARTNER LIVE?

IS YOUR SPOUSE TRAVELLING WITH YOU?

No Yes (if yes please answer the below)

HOW MANY CHILDREN DO YOU HAVE?

ARE THEY TRAVELLING WITH YOU?

No Yes (If yes please answer the below)

### CHILD 1

LAST NAME

FIRST NAMES

GENDER

FEMALE MALE

DATE OF BIRTH DD/MM/YYYY

NATIONALITY

WILL THEY BE TRAVELLING ON THEIR OWN PASSPORT?

Yes No

### CHILD 2

LAST NAME

FIRST NAMES

GENDER

FEMALE MALE

DATE OF BIRTH DD/MM/YYYY

NATIONALITY

WILL THEY BE TRAVELLING ON THEIR OWN PASSPORT?

Yes No

### CHILD 3

LAST NAME

FIRST NAMES

GENDER

FEMALE MALE

DATE OF BIRTH DD/MM/YYYY

NATIONALITY

WILL THEY BE TRAVELLING ON THEIR OWN PASSPORT?

Yes No

## DECLARATION

I CONFIRM THAT I HAVE READ AND UNDERSTOOD THE DECLARATION OF CONSENT AS DEFINED. HTTPS://CIBTVISAS.CO.UK/VISA-IRELAND-DECLARATION.