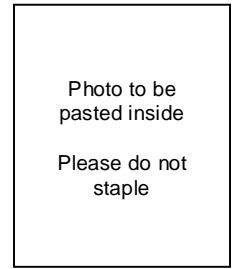


GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR

MINISTRY OF RELIGIOUS AFFAIRS
Department for the Promotion and Propagation of the Sasana
Kaba Aye, Yangon

**Application for the Study of the Theravada
Buddhism in Myanmar**



Name (in block letters) Mr. / Ms

Nationality

Age and Date of Birth

Place of Birth

Educational Qualification

Profession

Previous Experience

Present Address

Permanent Address

Passport No.

Issued at

Date of Issue Date of Expiry

Purpose of Visit

Short Visit / Long Study

Date of Arrival in Myanmar

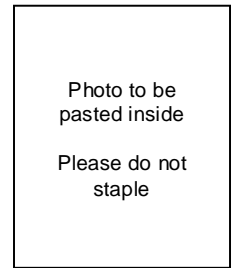
Duration of proposed stay

Travelling by

Signature Date

GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR

MINISTRY OF IMMIGRATION AND POPULATION
DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION
IMMIGRATION DEPARTMENT



APPLICATION FOR MEDITATION VISA

- 1. Name in full (in block letters)
- 2. Father's Name in full
- 3. Nationality
- 4. Sex
- 5. Date of birth
- 6. Place of birth
- 7. Occupation/profession (Employee, teacher, pensioner, housewife, etc.)
- 8. Personal description
 - (a) Color of hair
 - (b) Height
 - (c) Color of eyes
 - (d) Complexion
- 9. Passport
 - (a) Number
 - (b) Date of issue
 - (c) Place of issue
 - (d) Issuing Authority
 - (e) Date of expiry
- 10. Permanent address & Tel. - No
- 11. Address in Myanmar
- 12. Purpose of entry into Myanmar
- 13. Name and address of guarantor during stay in Myanmar
- 14. **Financial resources in Myanmar**
 - (a) Cash (Kyats & Foreign Currency)
 - (b) Bank deposit
 - (c) Name of Bank
 - (d) Amount
- 15. **Attention for Applicants**
 - (a) Apart from the professions mentioned in this visa application from applicants are not engage in any sort of work with or without charges.
 - (b) Applicant shall abide by the Laws of the Union of Myanmar and shall not interfere in the internal affairs of the Union of Myanmar.
 - (c) Legal action will be taken against those who violate or contravene any provision of the existing laws, rules and regulations of the Union Myanmar.

I hereby declare that I fully understand the above mentioned conditions, that the particulars given above are true and correct and that I will not engage in any activities irrelevant to the purpose of entry stated herein.

Date Signature of Applicant

(FOR OFFICE USE ONLY)

Visa No Date

Visa Authority

Date

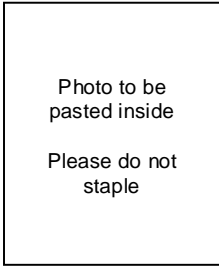
Signature of Officer in Charge

Place

Embassy of the Union of Myanmar

GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR

MINISTRY OF IMMIGRATION AND POPULATION
DIRECTORATE OF IMMIGRATION AND NATIONAL REGISTRATION
IMMIGRATION DEPARTMENT



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Visa No Date

Visa Authority

Date

Signature of Officer in Charge

Place

Embassy of the Union of Myanmar