### EMBASSY OF THE DEMOCRATIC REPUBLIC OF THE CONGO

1726 M Street, NW Suite 601 Washington, D.C. 20036 Tel.: (202) 234-7690 / 91 Fax: (202) 234-2609

#### **VISA REQUIREMENTS**

All applicants for a visa to the DRC are required to submit the following:

- 1. A valid Passport (for at least six months of validity remaining)
- 2. Two (2) application forms properly completed, dated and signed by the traveler.
- 3. 2 recent passport photos with the applicant facing the camera.
- 4. A copy of the "Green Card" or I-94 for non US citizens
- 5. A copy of an International Certificate of Vaccination showing immunization against yellow fever
- 6. A copy of the travel itinerary from an authorized travel agent
- 7. A letter from the company assuming all financial responsibilities for the traveler
- 8. An invitation letter notarized in the DRC.
- 9. A prepaid mailing envelope for return : Express Mail (United States Postal Service)

NB: Congolese nationals with dual citizenship are not required to present an invitation.

The Embassy reserves the right to deny visas to all requests it deems incomplete or unclear.

#### **VISA CATEGORIES & FEES**

(T/S) One-way transit visa	\$ 20	(T/R) Return / two-ways transit visa	\$ 40
(M/S) One entry for one month	\$ 115	(M/M) Multiple entry for one month	\$ 155
(2M/S) One entry for two months	\$ 150	(2M/M) Multiple entries for two months	\$ 200
(3M/S) One entry for three months	\$ 200	(3M/M) Multiple entries for three months	\$ 250
(6M/S) Single entry for six months	\$ 300	(6M/M) Multiple entries for six months	\$ 400

The fees are waived for diplomatic or official visas.

Payment method: MONEY ORDER, CERTIFIED CHECK OR COMPANY CHECK Payable to the order of: EMBASSY OF THE DEMOCRATIC REPUBLIC OF THE CONGO

All requests for non immigrant visas must be sent to:

The Embassy of the Democratic Republic of the Congo 1726 M Street, N.W Suite 601 Washington, D.C. 20036

Office hours: Monday to Friday 9 AM to 5 PM except on holidays.

Processing time: 3 days for regular passports

1 day for Diplomatic or Official passports

Note: WE NO LONGER PROCESS SAME-DAY VISAS (RUSHED SERVICE)



# EMBASSY OF THE DEMOCRATIC REPUBLIC OF THE CONGO

1726 M Street, NW. Suite 601, Washington, DC 20036 Phone: (202) 234-7690/91 Fax: (202) 234-2609



# VISA APPLICATION FOR SHORT STAY

G+month valid passport   Residence card   Residence card   Vaccination Certificate   Payment by money order or company check ONLY	REQUIREMENTS						
□ M/S □ 3M/S □ 3M/M □ 3M/S □ 3M/M □ 6M/S □ 6M/M   PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) (day/month/year) / / / 20  5. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country 10. Marital Status: □ Male □ Female 11. Spouse's information (even if separated or divorced): First name: Date and place of birth Nationality  12. Present address (street, city, province or state, postal code, country) 13. Duration at this address	□ 6+ month valid passport □ Company letter □ Notarized Invitation from contact in the DRC			<ul> <li>□ Airline ticket</li> <li>□ Residence card</li> <li>□ Vaccination Certificate</li> </ul>			
□ M/S □ 3M/S □ 3M/M □ 3M/S □ 3M/M □ 6M/S □ 6M/M   PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) (day/month/year) / / / 20  5. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country 10. Marital Status: □ Male □ Female 11. Spouse's information (even if separated or divorced): First name: Date and place of birth Nationality  12. Present address (street, city, province or state, postal code, country) 13. Duration at this address							
□ 3M/S □ 3M/M □ 6M/S □ 6M/M  PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) / / / 20  5. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country (day/month/year) / / / / / / / / / / / / / / / / / / /		СНОО	SE VISA CAT	EGORY			
PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number  2. Issuing authority  3. Issuance date (day/month/year) / / / 20  5. Names (as in passport) First  Middle  Last  Others  6. Place of Birth City and state  Country  7. Date of Birth (day/month/year) / / 8. Nationality (origin)  City and state  Country  9. Gender:  Male Female  10. Marital Status:  Male Female  11. Spouse's information (even if separated or divorced ): First name:  Date and place of birth Nationality  12. Present address (street, city, province or state, postal code, country)	□ M/S	□ <b>M</b> /M		□ <b>2M/S</b>	□ <b>2</b> M	I/M	
1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) 4. Expiration date (day/month/year) 7. Date of Birth City and state Country 7. Date of Birth City and state Country 7. Date of Birth City and state Country 9. Gender: 10. Marital Status:    Male	□ 3M/S	□ <b>3</b> M/M		□ <b>6M/S</b>	□ <b>6</b> M	I/M	
1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) 4. Expiration date (day/month/year) 7. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country 7. Date of Birth (day/month/year) 7. Date of Birth (day/month/year) 7. Date of Birth City and state Others  8. Nationality (origin) Others  9. Gender:   Male							
S. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country (day/month/year)  9. Gender: 10. Marital Status:	1.0					4.5	1 .
First Middle Last Others  6. Place of Birth City and state Country 7. Date of Birth (day/month/year) / 9. Gender: 10. Marital Status:    Male	1. Passport number	2. Issuing author	ority			(day/month/ye	ear)
City and state  Country  (day/month/year) /  9. Gender:    Male		Middle	Last		Others		
☐ Male ☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Separated ☐ Female  11. Spouse's information (even if separated or divorced ): First name: ☐ Date and place of birth ☐ Date and place of birth ☐ Nationality  12. Present address (street, city, province or state, postal code, country) ☐ 13. Duration at this address		Country				(origin)	
☐ Female  11. Spouse's information (even if separated or divorced ): First name:  Last name:  Date and place of birth / /  12. Present address (street, city, province or state, postal code, country)  13. Duration at this address							
First name:  Last name:  Date and place of birth  Nationality  12. Present address (street, city, province or state, postal code, country)  13. Duration at this address	□ Female	-	□ Married	□ Divorced	□Widowed	□ Separated	
		-	Date and p	place of birth	Nationality		
V. M. d	12. Present address (street, city, province or state, postal code, country)  13. Duration at this address						
Y ears Month						Years	Months
14. Telephone numbers Home: Fax; Business: Business fax: Mobile/Cellular:		Fax; B	usiness:	Business far	x: Mob	oile/Cellular:	
15. Name of employer or school  16. Present address of employer or school (street, city, province or state, postal code, country)							
17. Telephone: 18. Fax: 19. Present occupation / Profession	17. Telephone:	18. Fax:		19. Present	occupation / Profession	1	

20. Names of the person in the D First	RC* who you will be staying Last	with: Others	Relationship			
21. Hotel name (if applicable)  22. Address in the DRC (street, city, province or state)						
23. Telephone numbers Home	Fax	Business	Mobile			
24. Purpose of current trip to the	DRC*		25. Length of stay in the DRC* (in days)			
26. Have you ever been in the DI  ☐ Yes If yes, when?  ☐ No		p on the bottom of this page or use addi how long? Port of entry				
27. Father's information First name	Last name	Middle or other names	Nationality			
28. Mother's information First name	Last name	Middle or other names	Nationality			
Applicant's signature:						
Please write in the space below any additional information that could not fit in the space provided on the form. Make sure to identify by number the information you are referring to. Use additional pages as needed.						



# EMBASSY OF THE DEMOCRATIC REPUBLIC OF THE CONGO

1726 M Street, NW. Suite 601, Washington, DC 20036 Phone: (202) 234-7690/91 Fax: (202) 234-2609



# VISA APPLICATION FOR SHORT STAY

G+month valid passport   Residence card   Residence card   Vaccination Certificate   Payment by money order or company check ONLY	REQUIREMENTS						
□ M/S □ 3M/S □ 3M/M □ 3M/S □ 3M/M □ 6M/S □ 6M/M   PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) (day/month/year) / / / 20  5. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country 10. Marital Status: □ Male □ Female 11. Spouse's information (even if separated or divorced): First name: Date and place of birth Nationality  12. Present address (street, city, province or state, postal code, country) 13. Duration at this address	□ 6+ month valid passport □ Company letter □ Notarized Invitation from contact in the DRC			<ul> <li>□ Airline ticket</li> <li>□ Residence card</li> <li>□ Vaccination Certificate</li> </ul>			
□ M/S □ 3M/S □ 3M/M □ 3M/S □ 3M/M □ 6M/S □ 6M/M   PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) (day/month/year) / / / 20  5. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country 10. Marital Status: □ Male □ Female 11. Spouse's information (even if separated or divorced): First name: Date and place of birth Nationality  12. Present address (street, city, province or state, postal code, country) 13. Duration at this address							
□ 3M/S □ 3M/M □ 6M/S □ 6M/M  PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) / / / 20  5. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country (day/month/year) / / / / / / / / / / / / / / / / / / /		СНОО	SE VISA CAT	EGORY			
PLEASE PRINT OR TYPE IN THE SPACES PROVIDED  1. Passport number  2. Issuing authority  3. Issuance date (day/month/year) / / / 20  5. Names (as in passport) First  Middle  Last  Others  6. Place of Birth City and state  Country  7. Date of Birth (day/month/year) / / 8. Nationality (origin)  City and state  Country  9. Gender:  Male Female  10. Marital Status:  Male Female  11. Spouse's information (even if separated or divorced ): First name:  Date and place of birth Nationality  12. Present address (street, city, province or state, postal code, country)	□ M/S	□ <b>M</b> / <b>M</b>		□ <b>2M/S</b>	□ <b>2</b> M	I/M	
1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) 4. Expiration date (day/month/year) 7. Date of Birth City and state Country 7. Date of Birth City and state Country 7. Date of Birth City and state Country 9. Gender: 10. Marital Status:    Male	□ 3M/S	□ <b>3</b> M/M		□ <b>6M/S</b>	□ <b>6</b> M	I/M	
1. Passport number 2. Issuing authority 3. Issuance date (day/month/year) 4. Expiration date (day/month/year) 7. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country 7. Date of Birth (day/month/year) 7. Date of Birth (day/month/year) 7. Date of Birth City and state Others  8. Nationality (origin) Others  9. Gender:   Male							
S. Names (as in passport) First Middle Last Others  6. Place of Birth City and state Country (day/month/year)  9. Gender: 10. Marital Status:	1.0					4.5	1 .
First Middle Last Others  6. Place of Birth City and state Country 7. Date of Birth (day/month/year) / 9. Gender: 10. Marital Status:    Male	1. Passport number	2. Issuing author	ority			(day/month/ye	ear)
City and state  Country  (day/month/year) /  9. Gender:    Male		Middle	Last		Others		
☐ Male ☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Separated ☐ Female  11. Spouse's information (even if separated or divorced ): First name: ☐ Date and place of birth ☐ Date and place of birth ☐ Nationality  12. Present address (street, city, province or state, postal code, country) ☐ 13. Duration at this address		Country				(origin)	
☐ Female  11. Spouse's information (even if separated or divorced ): First name:  Last name:  Date and place of birth / /  12. Present address (street, city, province or state, postal code, country)  13. Duration at this address							
First name:  Last name:  Date and place of birth  Nationality  12. Present address (street, city, province or state, postal code, country)  13. Duration at this address	□ Female	-	□ Married	□ Divorced	□Widowed	□ Separated	
		-	Date and p	place of birth	Nationality		
V. M. d	12. Present address (street, city, province or state, postal code, country)  13. Duration at this address						
Y ears Month						Years	Months
14. Telephone numbers Home: Fax; Business: Business fax: Mobile/Cellular:		Fax; B	usiness:	Business far	x: Mob	oile/Cellular:	
15. Name of employer or school  16. Present address of employer or school (street, city, province or state, postal code, country)							
17. Telephone: 18. Fax: 19. Present occupation / Profession	17. Telephone:	18. Fax:		19. Present	occupation / Profession	1	

20. Names of the person in the D First	RC* who you will be staying Last	with: Others	Relationship			
21. Hotel name (if applicable)  22. Address in the DRC (street, city, province or state)						
23. Telephone numbers Home	Fax	Business	Mobile			
24. Purpose of current trip to the	DRC*		25. Length of stay in the DRC* (in days)			
26. Have you ever been in the DI  ☐ Yes If yes, when?  ☐ No		p on the bottom of this page or use addi how long? Port of entry				
27. Father's information First name	Last name	Middle or other names	Nationality			
28. Mother's information First name	Last name	Middle or other names	Nationality			
Applicant's signature:						
Please write in the space below any additional information that could not fit in the space provided on the form. Make sure to identify by number the information you are referring to. Use additional pages as needed.						