

PASSPORTS AND IMMIGRATION DEPARTMENT
SPONSORSHIP FORM FOR EXTENSION OF VISITORS PERMIT

PASSENGER'S INFORMATION:

Surname: _____ Given Name (s): _____

Nationality: _____

Date of Birth: _____

Passport No. _____

Date of Issue: _____

Date of Arrival: _____

Airline & Flight No: _____

Period of Extension requested:

From _____ To: _____

SPONSOR/EMPLOYER'S INFORMATION:

Name: _____ Date of Birth: _____

Nationality: _____

Legal Status: (Non Nationals only)

Temporary Resident

Permanent Resident

Visitor

Relation to Applicant: _____

Passport No: _____

Full Home Address: _____

Tel: (Home) _____

(Mobile) _____

I undertakes responsibility for the repatriation of the applicant to his/her country of citizenship. S/he is not to engage in any gainful employment.

Signature:.....

Date:.....