



DEPARTMENT: HOME AFFAIRS
REPUBLIC OF SOUTH AFRICA

APPLICATION FOR VISA OR TRANSIT VISA
[Section 7 (1) (g) read with sections 10A and 10B;
Regulation 8 (1)]

Failure to complete this application form in full may result in the visa being delayed or refused.
Please use block letters and black ink only.

PERSONAL PARTICULARS

Surname	TOLIRE										
First names (in full)	Babacar Mahamadou										
Maiden name	None										
Previous surname(s)	None										
Date of birth	Y	Y	Y	Y	M	M	D	D	City of birth		
	1	9	8	8	0	2	2	5	Bamako		
Country of birth	Mali										
Gender	<input checked="" type="radio"/> Male		<input type="radio"/> Female								
Nationality	Malian								If acquired by naturalisation, state original nationality		
Where and when was present nationality obtained.....											
Passport/Travel Document Number	B0929212								Issuing authority		
Type of document: Diplomatic/Official/	<input checked="" type="radio"/> Ordinary Passport		<input type="radio"/> Travel		Date of expiry						
Document/other (Specify)									09/09/2020		
Permanent residential address	Kulaban Corra plateau Rue 140, Porte 14 Bamako / Mali										

Period resident at this address..... <i>since 1999</i>		Telephone number (<i>223</i>) (code) <i>75.75.75.75</i> (number)	
Country of permanent residence..... <i>Mali</i>		Period resident in that country <i>Since 1988</i>	
Occupation or profession..... <i>Enseignant</i>			
Name, address and telephone no. of employer, university, organisation, etc. to which you are attached, or that you attend or which you represent <i>+ 223-6062 6262, Bamako, Mali, Rue Nelson Mandela</i>			
If self-employed, state name, address, telephone no. and nature of business			
Marital status	Never married	<input checked="" type="checkbox"/> Married	Widowed
			Separated
			Divorced
First name(s) of spouse			
Maiden name			
	Y	Y	Y
	Y	Y	Y
	M	M	D
	D	D	
Date of birth			Nationality.....
NB: SEPARATE FORMS MUST BE COMPLETED IN RESPECT OF PERSONS OVER THE AGE OF 16 AND CHILDREN UNDER THE AGE OF 16 TRAVELLING ON THEIR OWN PASSPORTS			
Particulars of children endorsed on your passport accompanying you:			
Surname	First name(s)	Date of birth	Place of birth
(1)			
(2)			
(3)			
(4)			

VISIT TO SOUTH AFRICA

Expected date of arrival in the Republic Y <i>2017</i> M <i>July</i> D <i>14</i>
Place of arrival..... <i>Johannesburg</i>
Purpose of visit..... <i>Touristic</i>
Duration of stay (months, weeks or days)..... <i>2 Months</i>
Number of entries required
Single <input checked="" type="checkbox"/>
Multiple <input type="checkbox"/>
Two <input type="checkbox"/>

Proposed residential address (physical) in the Republic, including the full name(s) of your host or hotel

Madiba's Legacy Hotel, street of Heroes

Names of organisations or persons you will be contacting during your stay in the Republic:

Name	Address	Relationship
W A H We are All Human	sweet stories square, Johannesburg	Friend

Identity document number or permanent residence permit number of South African host

SD3045A

Indicate by means of an X whichever is applicable

Have you at any time applied for a permit to settle permanently in South Africa?	yes	no	X
Have you ever been restricted or refused entry into South Africa?	yes	no	X
Have you ever been deported from or ordered to leave South Africa?	yes	no	X
Have you ever been convicted of any crime in any country?	yes	no	X
Is a criminal action pending against you in any country?	yes	no	X
Are you an unrehabilitated insolvent?	yes	no	X
Are you suffering from tuberculosis or any other infectious or contagious disease or any mental or physical deficiency?	yes	no	X
Have you ever been judicially declared incompetent?	yes	no	X
Are you a member of, or adherent to an association or organisation advocating the practice of social violence or racial hatred or are you or have you been a member of an organisation or association utilising crime or terrorism to pursue its ends?	yes	no	X

Give particulars if reply to one or more of the questions above is in the affirmative;

To be completed by applicants applying for visitor's permits exceeding three months:

In the case of a spouse or dependant minor child of the holder of a permit issued in terms of sections 11, 13, 14, 15, 17, 19 or 22, submission of a marriage certificate or an unabridged birth certificate.

Proof of academic sabbatical, if applicable.

Proof of non-remunerative voluntary or charitable activities to be undertaken, if applicable.

Proof of research to be undertaken, if applicable.

Proof of funds available for subsistence during period of visit.

To be completed by applicants applying for diplomatic, official or courtesy visas:

In the case of an official visit, submission of a note verbale.

In the case of a diplomatic placing in the Republic, proof of such placing.

To be completed only by passengers in transit to another country:

Destination after leaving the Republic.....
Mode of travel to destination.....
Intended date and port of departure from the Republic to that destination

Do you hold a visa or permit for temporary or permanent residence in the country of your destination? (Proof must be submitted)

To be completed by persons wishing to work in the Republic

Yes

No

If the answer is yes, please provide details

I SOLEMNLY DECLARE THAT THE ABOVE PARTICULARS PROVIDED BY ME ARE TRUE IN SUBSTANCE AND IN FACT AND THAT I FULLY UNDERSTAND THE MEANING THEREOF. I FURTHER DECLARE THAT I DO NOT CONTEMPLATE CHANGING THE PURPOSE OF MY VISIT WHILST IN THE REPUBLIC.


.....
Signature of applicant


.....
Date

FOR OFFICIAL USE ONLY

Approved/not approved by on.....
.....
Type of visa

Reasons for decision