6ヶ月以内撮影、白または水色の無背景。
Taken within 6 month, White or Blue plain background.

VISA APPLICATION FORM TO ENTER JAPAN

(Photo)
approx. 45mm ×45mm
2in×2in

Name in full —
(Surname)
I WAYAN BALI
(Given and middle name)

Different name used, if any NONE

通称があれば記入、ない場合は NONE と記入。
If you have an alias please fill-in, if you don't, fill-in NONE..

Date and place of birth 15 APRIL 1950 DENPASAR BALI INDONESIA
(Day) (Month) (Year) (City) (Province) (Country)

Sex MALE Marital status: married × single

Nationality or citizenship INDONESIAN

なければ NONE と記入。
If it doesn't apply to you, please fill-in NONE.

Former nationality, if any NONE

具体的に記入。Business のみでは不可。
Please fill-in specifically. "Business" only is not acceptable.

Purpose of journey to Japan TO VISIT FAMILY

Length of stay in Japan intended 17DAYS

できるだけ正確に記入。
Fill-in exact days of your stay in Japan.

Route of present journey : Probable date of entry 25 MAY 2010

Port of entry into Japan NARITA Name of ship or airline JL720

Passport *(Refugee or stateless should note the title of Travel Document)*

No. B12345678 Diplomatic, Official, Ordinary Issued at DENPASAR on 10 MAR 2010

Issuing authority IMMIGRATION OFFICE Valid until 10 MAR 2015

正確に記入する。なければ NONE と記入。
Fill-in accurately. Fill-in NONE if it doesn't apply to you.

Criminal record, if any NONE

Home address JL. RAYA PUPUTAN No.170 RENON DENPASAR BALI

固定電話と携帯電話
Landline and mobile phone Number

Tel. 0361-227628, 080-12345678

Profession or occupation COMPANY EMPLOYEE

Name and address of firm or organization to which applicant belongs PT. INDONESIA

JL. JAKARTA No.1 Gg. II DENPASAR Tel. 0361-654321

申請人が無職の場合、両親・配偶者の職業を記入。
Please fill-in parents' or spouse's job, if you are not working.

Post or rank held at present MANAGER

Principal former positions CHAUFFEUR

＊Partner's Profession/occupation (or Parents' Profession/occupation)

正確な住所と市外局番を含む電話を記入。
Fill-in the accurate address and phone number including toll number

Address of hotels or names and addresses of persons with whom applicant intends to stay

HOTEL NIPPON, 2-2-1 KASUMIGASEKI CHIYODA-KU TOKYO, TEL:03-1234-5678

Dates and duration of previous stays in Japan 10 JAN 2003-26 JAN 2003

正確な住所と市外局番を含む電話を記入。
Fill-in the accurate address and phone number including toll number

Guarantor or reference in Japan : Name GAIMU TARO

Address 1-1-1 KASUMIGASEKI CHIYODA-KU TOKYO Tel. 03-8765-4321

Relationship to applicant BROTHER IN LAW

＊(Remarks) Special circumstances, if any

I hereby declare that the statement given above is true and correct. I understand that immigration status and period of stay to be granted are decided by the Japanese immigration authorities upon my arrival. I understand that possession of a visa does not entitle the bearer to enter Japan upon arrival at port of entry if he or she is found inadmissible.

Date of application 10 MAY 2010 Signature of applicant *I Wayan Bali*
(Day) (Month) (Year)

＊These items are not essential to be filled

幼児等で自署できない場合は代理人と申請人の関係を付記。(例：Signed by mother)
Please write in addition the relation between the applicant and the representative if the applicant is an infant or a child who is unable to sign by himself . (Ex.: Signed by mother)