

Volunteer Visa Instructions Ghana

General Information

On page four of this document you will find a blank visa application. Please complete all fields as indicated in the instructions. If a field is not listed you should leave it blank. If you make a mistake on your visa application, please fill out a new one. The embassy will not accept visa applications that contain information which has been whited out or crossed out.

Any entries colored *blue* have been prefilled for you on the fillable visa application form.

<u>Note</u>-Do not mail visa application to the Embassy, use the address for Melwood Warehouse found on page 3. <u>Do not</u> send a fee with your application.

If you have any questions on completing this application please contact your Country Desk Officer: ghana@peacecorps.gov

Put your CAPS LOCK on, all fields must be entered in ALL CAPS

Application Instructions – Page One of Two

- □ For Official Use Only: Leave Blank
- Entries: Leave Blank
- □ **1a. Surname:** Input your full last name(s) exactly how it appears on your passport
- □ **1b. First Name(s):** Input your full first name(s) exactly how it appears on your passport
- □ **1d. Middle Name:** Input your full middle name(s) exactly how it appears on your passport
- □ **1c. Previous Name:** Input your most recent former or maiden name (leave blank if none)
- □ **1e. Date of Birth:** Input your date of birth as appropriate (e.g. 07-SEPT-1985)
- □ 1f. Place of Birth: Input the country you were physically born in
- □ 1g. Nationality: AMERICAN
- □ **1h. Former Nationality:** Input the country you were a citizen of at birth, if U.S. input *"AMERICAN"* (This is prefilled but can be changed)
- **2. Passport Information: Leave Blank**
- □ 3a. Profession/Occupation: PEACE CORPS VOLUNTEER
- □ 3b. Street/Mailing Address: PEACE CORPS / 1275 FIRST STREET NE
- □ 3c-e. City/State/Zip: WASHINGTON / DC / 20002
- □ **3f. Telephone Number:** *800-424-8580*
- □ Your Email Address: Input your current personal email address
- □ 4a. Street/Mailing Address: Input your current home address street
- □ **4b. City:** Input your current home address city
- □ **4c. State:** Input your current home address state

- □ **4d. Zip Code:** Input your current home address postal code
- □ 4e. Home Phone No: Input your current phone number
- □ 4f. Cell Phone No: Input your current phone number
- □ 4g. Emergency Contact Person: Input the name of your emergency contact
- □ **4h. Contact Person's Phone No:** Input your emergency contact's preferred phone number
- □ **4i. Relationship:** Input your emergency contact's relationship to you
- Date of Travel: Input the "Date of Departure" listed in your instructions email (e.g. 07-SEPT-1985)
- □ **Amount of Money Travelling With:** Enter an estimated dollar amount that you plan to have in your possession on your Date of Departure
- □ Roundtrip Ticket: NO
- □ Ticket Number: N/A
- □ Traveling By: Air

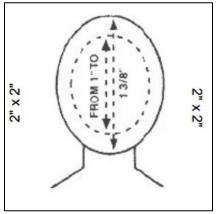
Application Instructions – Page Two of Two

- □ **Purpose of Journey:** *Business*
- □ 5a. Name of Hotel/Guest House: TAMU DANIEL, COUNTRY DIRECTOR FOR PEACE CORPS GHANA
- □ 5b. Street: 14 DADE LINK
- □ 5c. City/Town: CANTONMENTS
- □ 5d. Region: ACCRA
- □ **5e. Telephone Number:** 233-30274-4600
- □ 5f. Contact Person: JAMILLE SHULER, DIRECTOR OF MANAGEMENT AND OPERATIONS FOR PEACE CORPS GHANA
- □ 5g. Street: 14 DADE LINK
- □ 5h. City/Town: CANTONMENTS
- □ 5i. Region: ACCRA
- □ 5j. Tel. Number: 233-30274-4600
- □ 6a. Name of Employer: *PEACE CORPS*
- □ 6b. Address: 14 DADE LINK
- □ 6c. City/Town: CANTONMENTS
- □ 6d. Region: ACCRA
- □ 6e. Telephone Number: 233-30274-4600
- **7. Duration of Stay:** Input the "Duration of Stay" from your instructions email
- □ 8. Date of Last Visit: Answer appropriately (e.g. 07-SEPT-1985)
- □ 9. Explanation: Leave blank
- Applicant's Signature/Date: SIGN AND DATE <u>BOTH</u> APPLICATIONS AFTER YOU PRINT!

DISREGARD ADDRESS AT BOTTOM OF PAGE 2. DO NOT MAIL APPLICATION DIRECTLY TO EMBASSY

Photo Requirements

- □ You will need **two** 2"x2" photos, this size is the same as your passport photos
- □ Photos must have a white background and be printed on glossy photo paper
- □ Please make sure your ears and forehead are visible
- □ For more guidelines and examples please visit the <u>Department of State Website</u>
- □ Write your full name and "Ghana" on the back of all photos
- □ Write your name and "Ghana" on a small envelope and place your photos inside to protect them during shipping



Mailing Instructions

- □ Print **two** copies of your visa application **single** sided. Do not attach photos.
- □ Verify that all of the information is correct, if any of the information is incorrect please correct and reprint, do not cross out information or use whiteout

□ SIGN AND DATE <u>BOTH</u> APPLICATIONS!

• Your name must be legible from your signature

- □ Mail both your signed applications and photos in one shipping envelope to the address below
 - Do not attach photos place them in a smaller envelope labeled with your name and "Ghana" and ship all items in one shipping envelope
 - Disregard the address at the bottom of the application—mail to Peace Corps using the address below, not the Embassy

Peace Corps 1275 First St NE Attn: Transportation Washington, DC 20002



Application for Ghana Entry Permit/VisaREGULAR SERVICEEmbassy of Ghana Washington DC.

For Official Use Only													
Visa No.:						Attach recent passport size							
Type of Visa:													
Date of Issue:						photog	gre	aph here	1				
Issuing Officer:													
Charges:													
				-									
Single Entry \$60.00						FILL WITH BLACK INK ONLY 1. The form must be completed in block/							
Multiple Entry \$100.00						capital letters and submitted together with							
NO PERSONAL CHECKS						two(2) recent passport size photographs.							
1. Personal Information						2. Passport Information							
a. Surname /Last Nam	e					a. Passport Number			r	b. Date of Issue			
b. First Name(s)	b. First Name(s) d. Mide			e Nan	ne	c. Place of Issue		e. I		Date of Expiry			
c. Previous Name (if applicable)						3. Name and Address of Employer/School (USA)							
e. Date of Birth f. Place of Birth						a. Profession/Occupation							
g. Nationality h. Former Nationality (if any)					y)	NOTE: If retired or currently unemployed, please state the							
					address and telephone number of last/previous								
4. Residential Address						employer.							
a. Street/ Mailing Address:					b. Street/Mailing Address:								
b. City:	c.	State	d. Zi	p Co	de:				i				
						c. City	7		d. State	:	e. Zip Code:		
e. Home Phone No.:													
f. Cell Phone No.:					f. Telephone Number:								
g. Emergency Contact Person: (Full Name)													
						Your I	En	nail Addres	ss:				
h. Contact Person's Ph	one No.	1. 1	Relati	onsh	ıp								
								· ·	2 1.	•			
11				app cket	pplicant in possesion of roundtrip								
Amount of money Applicant is travelling If (yes					(yes	s) Indicate ticket number:							
with													
Traveling by:	Air			Sea	ı			Land					



Application for Ghana Entry Permit/Visa

Embassy of Ghana Washington DC

Purpose of Journ	ey:										
Business	Tourism Employme	ent	Official	Transit	Stuc	dent	Other				
5. Name, Addres	s and Telephone Number	of Lodg	ing place/	Contact P	erson/s ii	n Ghan	a				
a. Name of Hote	l/Guest House in Ghana	f. Contact Person in Ghana, Name and Address									
b. Street (Mailin		g. Street(Mailing address)									
c. City/Town d. Region			h. City/7								
e. Telephone Nu	mber		j. Tel. Number:								
•	nployment, indicate name	and add	lress of en	nployer in	Ghana						
a. Name of Emp											
b. Address/P .O	Box: d. Region										
c. City/Town		e. Telephone Number									
7. Duration of sta	y in Ghana		8.	Date of las	st visit to	Ghana	a				
9. For Tourism, l you selected Othe	ist at least two(2) areas of a er	interest	, or indica	te in writi	ng purpo	ose of jo	ourney if				
Applicant's Signature:			Date of A	pplication:							
For mailing: U Visa Processing Embassy of Gha 3512 Internation Washington DC	na 1al Drive NW										