

**DEPARTMENT OF INTERNAL AFFAIRS  
IMMIGRATION DIVISION  
APPLICATION FOR EXTENSION OF VISITOR'S PERMIT**



Documents to be produced ► Visitor's permit issued on arrival ► Valid passport ► Valid return ticket.  
An extension fee of SR:1000 is charged after the first 3 months for each three month period or part thereof

1. VISITOR'S PERMIT CARD NUMBER ON ARRIVAL: .....

2. PASSPORT NUMBER: .....

3. PASSPORT EXPIRY DATE: .....(dd/mm/yyyy)

4. SURNAME (Mr/Mrs/Miss): .....

5. GIVEN NAMES: .....

6. IS APPLICANT'S NAME ENDORSED IN PARENTS'/GUARDIAN'S  
PASSPORT: (applicable for endorsed children only)  YES / NO  (✓)

7. NATIONALITY: .....

8. FULL RESIDENTIAL ADDRESS IN SEYCHELLES: .....

..... Phone: .....

9. HAVE YOU APPLIED FOR AN EXTENSION OF VISITOR'S PERMIT BEFORE?  YES / NO  (✓)

10. REASONS OF EXTENSION: .....

.....

11. EXPECTED DATE OF DEPARTURE: .....(dd/mm/yyyy)

12. VALID RETURN/ONWARD TICKET EXPIRY DATE: .....(dd/mm/yyyy)

13. WHAT FUNDS HAVE YOU AT YOUR DISPOSAL TO SUPPORT YOURSELF DURING  
YOUR STAY IN SEYCHELLES? (Proof of funds and bank receipts of foreign transactions may be required)

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I declare that I am not a prohibited immigrant and do not hold any other permits. I undertake to immediately inform the Immigration Office whenever I change address in Seychelles. The above mentioned details are true to the best of my knowledge.

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Signature of Applicant Date(dd/mm/yyyy)

Application number	Extension permit number	Permit extended date
OFFICE USE ONLY	OFFICE USE ONLY	OFFICE USE ONLY

IMM-VISA  
10.0

OFFICE USE ONLY

RECEIVED BY:.....

ON..... (dd/mm/yyyy) COMMENTS:.....

APPROVED:       YES / NO  (✓)

REMARKS: .....

.....  
SIGNATURE OF IMMIGRATION OFFICER

.....  
DATE (dd/mm/yyyy)

FEE DUE <input type="checkbox"/> YES / NO <input type="checkbox"/> (✓)	AMOUNT DUE:	
Cash Receipt Number	Date	
		RMBUP-VTD