

ISLAMIC REPUBLIC OF IRAN MINISTRY OF FOREIGN AFFAIRS GENERAL DIRECTORATE FOR CONSULAR AFFAIRS

VISA APPLICATION FORM II FOR UNITED STATES NATIONALS

1.	What is the main purpose of your visit to the Islamic Republic of Iran?			
2.	What is your permanent home address, telephone number and email address?			
3.	What is your employer's complete address and telephone number?			
4.	Have you ever held an official position(s) in the government; Congress; or judiciary of the United States of America? If yes, please specify the title and duration of the position.			
5.	Have you ever travelled to Iran before? If yes, please provide detailed information on the dates, host, people and places visited during the stay.			
6.	What is your educational background? Please provide information on the school(s)/university you have studied at and/or graduated from.			

7.	Do you have any particular skill(s)/expertise?
8.	Which professional, social or charitable organization(s) are you, or have you been, affiliated to?
9.	Do you have any friends/relatives in Iran? If yes, please list their full name(s), contact information and address(es).
10.	Have you performed military service or have you ever been a member of any military forces, mercenaries or militia?
11.	Would you be involved in any media, press, or journalistic activity or scientific research in the Islamic Republic of Iran? If yes, where and when?
12.	Have you ever been infected by any contagious diseases?
	archy confirm that all the information provided above is indeed true correct and

I, (INSERT NAME) her	eby confirm that all the in	nformation provided abo	ve is indeed true, correct and
accurate.			

PRINT FULL NAME	Signature	INSERT DATE