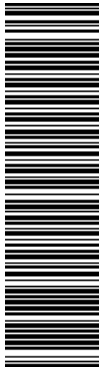


Mail documents to: VisaHQ.com Inc.
Embassy Row
2005 Massachusetts Ave. NW
Washington, DC 20036

Tel: (800)345-6541



Mali Tourist visa Application



Please enter your contact information

Name:

Email:

Tel:

Mobile:

The latest date you need your passport returned in time for your travel:

The Embassy of Mali is closed every Wednesday.

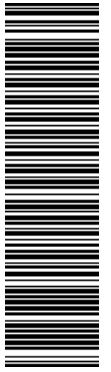


Mali tourist visa checklist

- Filled out and signed Mali tourist visa application form.** The form is enclosed.
- Original Passport.** Passport must have at least 6 months remaining validity and have at least 1 visa page.
- 2 Photographs.** Standard passport photographs 2x2 inches on a white background.
- Payment.** Credit Card Authorization form, Certified Check, or Money Order payable to **VisaHQ.com**.
- Return mailer.** Prepaid self-addressed return label or payment for FedEx.
- Itinerary.** A reservation of the flight itinerary under the traveler's name. Must show flights entering and exiting Mali.
- Yellow Fever Vaccination.** A copy of the International Certificate of Vaccination (ICV) for yellow fever. To learn more about the yellow fever vaccination or to locate a vaccination clinic, please visit the CDC's yellow fever resource page.
- Letter of Invitation.** If staying with friends or family, a letter of invitation from the host in Mali, can be used instead of the hotel reservation. The letter should be addressed to the Embassy of Mali, Visa Section and should state the relationship to the applicant, the dates of the visit, and the address and phone number where you will be staying.

Mail documents to: VisaHQ.com Inc.
Embassy Row
2005 Massachusetts Ave. NW
Washington, DC 20036

Tel: (800)345-6541



If you wish to prepay return shipping, please add the shipping fee to the total and provide return address:

- FedEx 2nd day delivery - From \$16
- FedEx Standard Overnight - From \$22
- FedEx Priority Overnight - From \$26
- FedEx First Overnight - From \$55
- FedEx Saturday delivery - From \$60
- Prepaid self addressed mailer - \$0
- Local pick up in Washington - \$0
- Direct Signature Required - \$5

Name:

Company:

Address:

City:

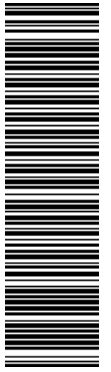
State:

Zip:

* Actual prices may vary based on location per FedEx.com.

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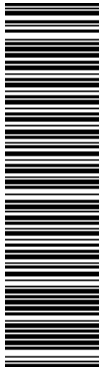
Mali Tourist visa Application

	Type of visa	Validity	Processing time	Embassy fee	Service fee	Total
	Multiple entry	up to 1825 days	5 business days	\$131.00	\$99.00	\$230.00
	Multiple entry	up to 1825 days	3 business days	\$141.00	\$139.00	\$280.00
	Multiple entry	up to 1825 days	Same business day	\$201.00	\$179.00	\$380.00

This order is subject to Terms of Service, posted on VisaHQ website.
All fees and requirements may change without notice.

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Embassy Row
2005 Massachusetts Ave. NW
Washington, DC 20036

Tel: (800)345-6541



Credit card authorization form

By signing this form i accept VisaHQ.com Terms of Service and authorize to charge my credit card for the amount of \$

Name on the Credit Card:

Credit card number: - - -

Exp. date: / CVC:

Credit Card Billing Address:

Signature:

Comments:

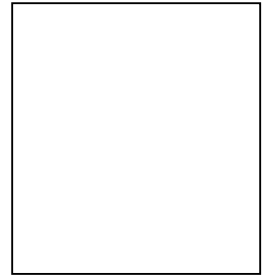
Thank you!
We accept all major credit cards.



For Official Use

Numéro de Code

Visa du Chef du
Service Consulaire



AMBASSADE DE LA REPUBLIQUE DU MALI AUX ETATS UNIS

2130 R STREET N.W. WASHINGTON D.C. 20008

TEL: 202 332 22 49 FAX: 202 332 66 03

DEMANDE DE VISA D'ENTREE AU MALI / MALI VISA APPLICATION FORM

NOM / LAST NAME: _____

SURNAME / PRENOM: _____

DATE DE NAISSANCE / DATE OF BIRTH: _____

LIEU DE NAISSANCE / PLACE OF BIRTH: _____

NATIONALITE / CITIZENSHIP: _____

PROFESSION / OCCUPATION: _____

LIEU D'EMPLOI / EMPLOYER'S ADDRESS: _____

ADRESSE PERMANENTE / PERMANENT ADDRESS: _____

ADRESSE AU MALI / ADDRESS IN MALI: _____

TELEPHONE / PHONE NUMBER: _____

FAX / FAX: _____

EMAIL: _____

MOTIF DU VOYAGE / PURPOSE OF THE TRIP: _____

DATE D'ENTRÉE / DATE OF ARRIVAL : _____

DUREE DU SEJOUR / LENGTH OF STAY: _____

TYPE DE VISA/ TYPE OF VISA 3 MONTHS SINGLE ENTRY 3 MONTHS MULTIPLE ENTRIES
 6 MONTHS MULTIPLE ENTRIES 1 YEAR MULTIPLE ENTRIES 5 YEARS MULTIPLE ENTRIES
(US Citizens Only / Pending Eligibility)

N° DU PASSEPORT / PASSPORT NO: _____

DELIVRE LE / ISSUED ON: _____

EXPIRE LE / EXPIRE ON: _____

SIGNATURE :

DATE :