

**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. 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 THE APPLICANT'S NAME ENDORSED IN THE PASSPORT: (applicable for endorsed children only) **YES / NO (✓)**

7. NATIONALITY: .....

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

9. HAVE YOU APPLIED EXTENSION OF VISITORS PERMIT BEFORE? **YES / NO (✓)**

10. REASONS OF EXTENSION: .....

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

12. VALID RETURN 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 will also inform the Immigration Office whenever I change address in Seychelles. The above mentioned details are true to the best of my knowledge.

.....  
Signature of Applicant

.....  
Date(dd/mm/yyyy)

Application number	Extension permit number	Extended date
OFFICE USE ONLY	OFFICE USE ONLY	OFFICE USE ONLY

**OFFICE USE ONLY**

RECEIVED BY.....

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

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.....  
.....  
.....

FEE DUE :           **YES / NO**   (✓)

AMOUNT :

APPROVED:           **YES / NO**   (✓)

REMARKS: .....

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SIGNATURE OF IMMIGRATION OFFICER

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

Cash Receipt Number

Date

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