

Requirements for Approved Applicants to Obtain an Entry Visa to Iran

Please read and adhere to the following statements very carefully. Failure to follow the guidelines may result in the rejection of your visa request.

- 1- Fill out the attached "Visa Application Form." Answer all questions completely. Complete addresses, names, phone numbers, etc. must be written. If a question is not applicable to you, write N/A. Failure to answer all questions completely may result in denial of your visa request.
- 2- The applicant's valid passport. The Passport must be valid for at least six months.
- 3- One passport photo. The Passport photo must be of **professional quality** (2x2 inches in size with white background ; head must be directly facing the camera) and must have been taken within the last six months. Do not send photocopied pictures. Photos of Muslim female applicants of age nine and above must be with Islamic head cover (hejab), and in accordance with Islamic dress code. Please glue or staple the photo to the application form. Write your name lightly on the back of the photo.
- 4- For visa fees, please refer to the list below, our website, or call our office. All fees can be paid via money order or cashier check, and must be in the form of U.S. dollars paid to the order of "Embassy of Pakistan." For U.S., the shipping fee is \$30; for outside U.S. \$40. No prepaid envelope is accepted.
- 5- You must allow enough time for your request to be processed. We cannot be responsible for reservations, or tickets that are paid for in advance.
- 6- **Expedited service** is available only if you add \$58 for each passport to the visa fee. **This is in addition to the fee for shipping.** You must use a red magic marker to write "**Please Expedite**" clearly and legibly on the **outside** of the **carrier service** envelope, front and back. This will prevent your package from being mixed with other packages, and will help us identify it easily.

بسمه تعالی

دفتر حفاظت منافع جمهوری اسلامی ایران - واشنگتن دی سی

EMBASSY OF PAKISTAN

INTERESTS SECTION OF THE ISLAMIC REPUBLIC OF IRAN

1250 23rd St. N.W. Suite # 200 WASHINGTON, DC 20037 TEL: (202) 965-4990-4, FAX: (202) 965-1073

WWW.DAFTAR.ORG, E-MAIL ADDRESS: INFO@DAFTAR.ORG

Visa Fees:

For visa fees for attending conferences, lectures, meetings, activities, etc., (excluding purely tourism or pilgrimage), please refer to column 1. These fees are for single entry visa. Double entry visas must specifically be approved by our Foreign Ministry and have different fees.

For tourism and pilgrimage visa fees, please refer to column 2, and 3. For other visa types and countries not listed, please inquire.

Country	Fee conferences, lectures, meetings, activities, etc. 1	Fee (one entry) tourism and pilgrimage 2	Fee (Double entry) tourism and pilgrimage 3	Country	Fee conferences, lectures, meetings, activities, etc. 1	Fee (one entry) tourism and pilgrimage 2	Fee (Double entry) tourism and pilgrimage 3
1- Afghanistan	\$120	\$60 Add \$30 for each accompany.	\$90 Add \$45 for each accompany.	18- Mexico	\$50	\$45	\$65
2- Armenia	\$25	\$15	\$25	19- Netherlands	\$90	\$75	\$110
3- Australia	\$120	\$105	\$155	20- New Zealand	\$150	\$120	\$175
4- Austria	\$90	\$75	\$110	21- Nicaragua	\$45	\$30	\$45
5- Bangladesh	\$45	\$40	\$55	22- Nigeria	\$65	\$60	\$90
6- Canada	\$90	\$75	\$110	23- Norway	\$90	\$75	\$110
7- China	\$120	\$75	\$110	24- Pakistan	\$45	\$40 tourism	\$55 tourism
8- Croatia	\$45	\$40	\$55			\$25 pilgrimage	\$40 pilgrimage
9- Egypt	\$30	\$15	\$15	25- Peru	\$75	\$60	\$90
10- France	\$90	\$75	\$110	26- Philippines	\$65	\$60	\$90
11- Germany	\$90	\$75	\$110	27- Russia	\$105	\$60	\$90
12- Greece	\$90	\$75	\$110	28- Tanzania	\$75	\$60 tourism	\$90 tourism
13- India	\$60	\$45 tourism	\$65 tourism			\$30 pilgrimage	\$45 pilgrimage
		\$15 pilgrimage	\$25 pilgrimage	29- U.K	\$300	\$265	\$400
14- Iraq	\$40	\$15	\$25	30- U.S.A.	\$120	\$90	\$135
15- Japan	\$75	\$60	\$90	31- Venezuela	\$60	\$30	\$45
16- Kuwait	\$60	\$25	\$40	32- Vietnam	\$45	\$30	\$45
17- Lebanon	\$45	\$15	\$25				

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PLEASE
GLUE OR STAPLE
YOUR PICTURE
HERE.

PUT YOUR NAME
ON THE BACK OF
THE PICTURE.

VISA AUTHORIZATION NO#

شماره مجوز روادید:

FOR OFFICE USE ONLY

مخصوص قسمت اداری

شماره روادید	نوع روادید	مدت اقامت
تاریخ صدور	مدت اعتبار	مجوز و تاریخ صدور

ALL QUESTIONS ON THIS FORM MUST BE ANSWERED FOR THE APPLICATION TO BE CONSIDERED

PLEASE PRINT CLEARLY IN ENGLISH, USING THE INFORMATION IN YOUR PASSPORT

FIRST NAME: نام:	FATHER'S NAME AND NATIONALITY: نام و تابعیت پدر:
LAST NAME: نام خانوادگی:	MARITAL STATUS: وضعیت تاهل: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> متاهل <input type="checkbox"/> مجرد <input type="checkbox"/> مطلقه
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE جنسیت: <input type="checkbox"/> مرد <input type="checkbox"/> زن	IF MARRIED, NAME & NATIONALITY OF SPOUSE: در صورت تاهل، نام و تابعیت همسر:
PASSPORT NO: شماره گذرنامه:	OCCUPATION: شغل:
EXPIRATION DATE: تاریخ خاتمه اعتبار:	FORMER OCCUPATION: شغل قبلی:
PLACE & DATE OF BIRTH: تاریخ و محل تولد:	NAME OF EMPLOYEE: نام کارفرما:
PRESENT NATIONALITY: تابعیت فعلی:	YOUR VISA STATUS IN THE COUNTRY OF YOUR RESIDENCE: نوع ویزای شما در کشور محل اقامت:
FORMER NATIONALITY: تابعیت قبلی:	EDUCATION: تحصیلات:
TYPE OF VISA REQUESTED: <input type="checkbox"/> TOURISM/جهانگردی <input type="checkbox"/> PILGRIMAGE/زیارتی <input type="checkbox"/> OFFICIAL/ورود <input type="checkbox"/> JOURNALISM/خبرنگاری <input type="checkbox"/> DIPLOMATIC/سیاسی <input type="checkbox"/> OTHER/متفرقه	نوع روادید درخواستی: متفرقه/ OTHER <input type="checkbox"/> سیاسی/ DIPLOMATIC <input type="checkbox"/> خبرنگاری/ JOURNALISM <input type="checkbox"/> ورود/ OFFICIAL <input type="checkbox"/> زیارتی/ PILGRIMAGE <input type="checkbox"/> جهانگردی/ TOURISM <input type="checkbox"/>
NUMBER OF ENTRIES REQUESTED: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE	دفعات ورود درخواستی به ایران: <input type="checkbox"/> یکبار <input type="checkbox"/> دوبار
PURPOSE OF VISIT TO THE I.R. OF IRAN:	منظور از مسافرت به ایران:
DATE OF DEPARTURE FROM THE COUNTRY OF RESIDENCE:	تاریخ حرکت از کشور محل اقامت:
DATE OF ENTRY TO THE I.R. OF IRAN:	تاریخ ورود به ایران:
DURATION OF STAY IN THE I.R. OF IRAN:	مدت اقامت در ایران:
HAVE YOU EVER APPLIED FOR VISA TO THE I.R. OF IRAN? <input type="checkbox"/> YES <input type="checkbox"/> NO, IF YES, WHEN & WHERE?	آیا تاکنون برای مسافرت به ایران درخواست روادید کرده اید؟ <input type="checkbox"/> بله <input type="checkbox"/> خیر، اگر بله، کی و کجا؟
HAS YOUR VISA APPLICATION TO THE I.R. OF IRAN EVER BEEN REJECTED? <input type="checkbox"/> YES <input type="checkbox"/> NO, IF YES, WHEN & WHY?	در صورت مخالفت قبلی با صدور روادید، تاریخ آن را اعلام نمایید: <input type="checkbox"/> YES <input type="checkbox"/> NO, IF YES, WHEN & WHY?
HAVE YOU EVER VISITED THE I.R. OF IRAN BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO, IF YES, WHEN & WHY?	آیا تاکنون به ایران مسافرت کرده اید؟ <input type="checkbox"/> بله <input type="checkbox"/> خیر، اگر بله، تاریخ و علت آن را توضیح دهید:
LIST ALL CITIES IN THE I.R. OF IRAN YOU HAVE VISITED:	شهرهایی را که در ایران از آنها دیدن کرده اید را نام ببرید:

WILL YOU BE ACTIVE IN JOURNALISTIC AFFAIRS OR SCIENTIFIC RESEARCH IN THE I.R. OF IRAN?

آیا قصد کار خبرنگاری و یا تحقیقاتی در ایران دارید؟

YES NO

بله خیر

NAME OF THE INDIVIDUALS YOU PLAN TO MEET WITH IN THE I.R. OF IRAN:

نام اشخاصی که قصد ملاقات با آنها را دارید، بنویسید:

PLEASE ENTER THE NAME & TELEPHONE NUMBER OF TWO OF YOUR FRIENDS OR RELATIVES IN IRAN: **تلفن دو تن از دوستان یا بستگان خود را در ایران بنویسید:**

1- NAME: TEL:

2- NAME: TEL:

LIST ALL COUNTRIES YOU HAVE VISITED:

کشورهایی را که تاکنون از آنها دیدن کرده اید را نام ببرید:

LIST ALL COUNTRIES YOU STAYED MORE THAN SIX MONTHS: **در صورتی که توقف بیش از شش ماه در کشوری داشته اید، آن کشورها را نام ببرید و دلیل آن را توضیح دهید:**

HAVE YOU EVER HAD ANY HISTORY OF ARRESTS OR CONVICTIONS IN ANY COUNTRY? IF YES, PLEASE EXPLAIN: **آیا تاکنون در هیچ کشوری سابقه کیفری و دستگیری داشته اید؟ اگر بله، لطفاً توضیح دهید:**

HAVE YOU EVER BEEN INFECTED BY ANY CONTAGIOUS DISEASES? IF YES, PLEASE EXPLAIN: **آیا تاکنون به بیماری مزمنی که میتواند سلامتی جامعه را به خطر بیندازد مبتلا شده اید؟ اگر بله، لطفاً توضیح دهید:**

YOUR ADDRESS & TELEPHONE NUMBER IN THE I.R. OF **IRAN**:

آدرس و تلفن محل اقامت خود در **ایران** را بنویسید:

E-MAIL :

BUSINESS ADDRESS (NOT P.O. BOX):

آدرس و تلفن محل کار:

STREET:

CITY: STATE: ZIP CODE: TEL: () -

MAILING ADDRESS (NOT P.O. BOX):

آدرس پستی:

STREET:

CITY: STATE: ZIP CODE: TEL: () -
CELL: () -

I UNDERTAKE TO OBSERVE, DURING MY STAY IN THE I.R. OF IRAN, ALL THE LAWS AND REGULATIONS APPLICABLE TO FOREIGN NATIONALS AND I DECLARE THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

اینجانب تعهد میکنم که در طول اقامت در جمهوری اسلامی ایران، کلیه قوانین مربوطه را رعایت بنمایم و کلیه اطلاعات فوق صحیح میباشد.

APPLICANT'S SIGNATURE: _____

DATE: _____