

CHECKLIST FOR THE IMPLEMENTATION/REVALIDATION OF 47(A)(2) VISA

IMPLEMENTATION

REVALIDATION

SPONSOR _____
 BOI PEZA AIIAS SIL PNVSCA OTHERS _____

DOJ 1ST INDORSEMENT DATED _____

EXPIRY DATE OF 47(A)(2) VISA _____

- With multiple entry privileges
- Exempt from payment of immigration and registration fees

	NAME	POSITION	NATIONALITY	PASSPORT EXPIRY		
				MM	DD	YY
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____

DOJ 1ST INDORSEMENT DATED _____

	ORIGINAL ENTRY			9(A) E.O.408	LATEST ENTRY			9(A) E.O.408	
	MM	DD	YY		MM	DD	YY		
1.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

CONTACT PERSON _____ TEL. NO. _____

VERIFIED BY : _____ DATE _____

