

Brazil Business Visa Application



IMPORTANT: Please enter your contact information

Name:

E-mail:

Tel:

Mobile:

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



Brazil business visa checklist

- Filled out and signed Brazil business 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.
- 1 Photographs.** Standard passport photographs 2 x 2 inches on white background.
- Payment.** Credit Card Authorization form, Certified Check, or Money Order payable to VisaHQ.ca.
- Return mailer.** Prepaid self-addressed return label or payment for FedEx.

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

- FedEx 2nd day delivery - add CAD \$25
- FedEx Priority Overnight - add CAD \$30
- FedEx First Overnight - add CAD \$40
- FedEx Saturday delivery - add CAD \$65

Name:

Company:

Address:

City:

State:

Zip:

- Itinerary.** Copy of round trip tickets or itinerary.
- Yellow Fever Vaccination.** If the applicant has traveled within the last 90 days to any of the Yellow Fever Countries an International Certificate of Vaccination for Yellow Fever will be required.
- Business Letter.** Letter from company in Canada explaining the purpose of the trip, companies to be visited and guaranteeing sufficient funds.

- Business Letter.** Original letter (not a copy) from the inviting company in Brazil written in Portuguese on the company's official letterhead, stating the job description and job position of the contact person in Brazil, a description of the intended activities of the applicant in Brazil, and financial responsibility for the trip, if the Brazilian company will be responsible for funding.

- Business Card.** Original business card from applicant

Brazil business visa fees for citizens of Canada

Type of visa	Max. validity	Embassy fee	Our fee	Processing time	Total
Single Entry	up to 90 days	CAD \$112.00	CAD \$99.95	10 business days	CAD \$211.95

Credit Card Authorization Form

I authorize VisaHQ.ca to charge my credit card for the amount of \$

Name on the Credit Card:

Credit Card number: - - - Exp. date: /

Credit Card Billing Address:

Signature:

Comments:

Thank you!
We accept all major credit cards.





Protocol number	Visa number
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VISA APPLICATION FORM

01 - Full name (<i>as per passport; do not abbreviate or omit any name</i>) First Middle Last			Attach photo here - size: 40 mm x 35mm (1 9/6 x 1 3/8 inches) - white or off-white background - front view, full face - must be recent picture
02 - Place of birth (city/state/country)	03 - Date of birth Day Month Year		
04 - Country of citizenship	05 - Sex male <input type="checkbox"/> female <input type="checkbox"/>	06 - Marital status	
07 - Passport #	08 - Issuing country	09 - Expiration date Day Month Year	
10 - Parent's full name (<i>do not abbreviate or omit any name</i>) and country of citizenship Father's: _____ Mother's: _____			
11 - Highest level of education (check only one box) <input type="checkbox"/> no diploma <input type="checkbox"/> high school diploma or the equivalent (<i>e.g., GED</i>) <input type="checkbox"/> some college credit, but less than one year <input type="checkbox"/> more than one year of college, but no degree <input type="checkbox"/> associate's degree (<i>e.g., AA, AS</i>) <input type="checkbox"/> bachelor's degree (<i>e.g., BA, AB, BS</i>) <input type="checkbox"/> master's degree <input type="checkbox"/> professional degree (<i>e.g., MD, DDS DVM, LLB, JD</i>) <input type="checkbox"/> doctorate degree		12 - Major/primary field of study	
		13 - List any special skill and/or certificates	
		14 - Job position (<i>as per business card</i>) or title	
		15 - Employer (<i>for students, name school/university</i>)	
		16 - E-mail:	
17 - Business address		18 - Business telephone # (with area code)	
19 - Home address		20 - Home telephone # (with area code)	

FOR OFFICIAL USE ONLY

A - Consulta à SERE OF <input type="checkbox"/> TEL <input type="checkbox"/> No. _____		B - Autorização da SERE DESP <input type="checkbox"/> DESPTEL <input type="checkbox"/> No. _____		C - Tipo do Visto _____	
D - <input type="checkbox"/> Concessão <input type="checkbox"/> Denegação <input type="checkbox"/> Impedimento		E - <input type="checkbox"/> Uma entrada <input type="checkbox"/> Múltiplas entradas		F - Validade _____anos/dias	
G - Data _____/_____/_____		H - Observações			
I - Assinaturas					
Funcionário				Chefia	

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IMPORTANT: FORMS THAT ARE INCOMPLETE AND INCORRECTLY FILLED OUT WILL BE RETURNED. CAREFULLY READ AND FOLLOW INSTRUCTIONS AT THE BOTTOM OF THIS PAGE.

29 - I declare that the above information is true and accurate.				
Name (type or print)	Date	Signature		
	Day	Month	Year	

INSTRUCTIONS
<ul style="list-style-type: none"> ◆ Type or write in block letters, on blue or black ink only. Form can be filled out on line. ◆ Complete first and second pages, except for box marked "For Official Use Only". ◆ Answer all questions thoroughly and accurately. If a question does not apply, please type N/A. ◆ Sign and date each form. Original signature is mandatory (no photocopy).