REQUEST FOR	RECIBO N.º							
TO BE FILLED IN LEGIBLE LETTERS 请用清晰字体填写		For official use			VISTO N.°			
					DATA DE EMISSÃO			
Temporary 临时入境					//20			
Single entry 单次入境					VALIDADE			
Multiple entries 多次入境					//20			
Surname 姓 王		Full name 全名 王兰						
Maiden name 婚前姓名		Country and place of birth 出生地、国家 中国山东省青岛						
Date of birth 出生日期	Sex 性别		Marital statu 婚姻状况	S	Nationality 国籍			
1979.4.30	女		□ 未婚 □ 已婚		中国			
Passport number	ort number Date of issu		•		P.te nationality			
护照号码 <b>G1130033</b>	发照日期 28 / 12 /200	ne.	有效期 <b>29 / 12 /2009</b>		护照国籍 <b>中国</b>			
Profession / Occupation	<i>)</i> 5			<b>中国</b>				
职业	Position you hold 职位							
医生		主治医师						
Institution, organization or firm you work 你工作的机构、组织或公司								
北京同仁医院								
Address of the permanent residence 固定住所地址 中国北京市朝阳区丽水家园**楼****号								
Have you ever before been in Mozambique?  是否曾经到过莫桑比克?  Yes  是  不								
Have you ever been a resident in Mozambique? Yes								
Why did you leave Mozambique?       Date of exit         因何种原因离开莫桑比克?       离境日期								
Mention the institutions and firms to which you were attached 列出你曾经隶属过的莫桑比克的机构和公司								
INCOMPLETE OR INCORRECT FILLING IN OF THIS FORM MAY RESULT IN DELAY DEVOLUTION OR REJECTION 表格中不完整或错误可能导致延迟或拒签								

<u>In detail</u> give reasons for your entry in Mozambique 详细列明访莫缘由									
<u> </u>	riends								
旅游									
Length of stay in Mozambique Date of entry Date of exit									
Length of stay in Mozambique 驻莫时长			Date of entry   入境日期		Bale of exit 离境日期				
1个月			1 / 5 / 2009		1/6/2009				
Entry border	Exit border								
入境地点	出境地点 <b>马普托国际机场</b>								
马普托国际机场									
Address of residence in Mozambique 在莫桑比克的住所地址									
Province	District City			Avenue/		House N°			
省	X	市		大街/街道		门牌号			
马普托	马普托	马普:		毛泽东大	道	1149			
Relatives, friends living in Mozambique 在莫桑比克的亲戚、朋友									
Full name	Nationality		Relationship	Address	3				
全名	国籍			地址					
Reserved for stamps									
			, , , , ,						
主义									
Date 日期 } <b>15 / 4 / 2009</b>									
া সূগ Signature of applicant or of the applying entity									
申请人或申请单位的签名									
ASSINATURA RECONHECIDA POR SEMELHANÇA À EXISTENTE NO									
N.° EMITIDO A/ EM									
RESERVADO AOS SERVIÇOS				DATA DA RECEPÇÃO					
					//20				
Assinatura do Funcionário					DATA DE ENTRECA				
					DATA DE ENTREGA				