

<記入例>

・消えるペンでの記入不可

FORM 14A IMMIGRATION ACT 1959 [SECTION – 55(1)]

Affix a recent
Passport-size
photograph here

Notes:

* Check the box where appropriate

APPLICATION FOR ENTRY VISA

PART I – PARTICULARS OF APPLICANT

名前 (パスポートに記入されている順番にご記入ください)

Name:
(Full name as shown in travel document)

C	H	E	N	G	T	A	R	O											
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別名、通称
Alias:
(パスポートに記載のある方のみ)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

生年月日
Date of Birth:

0	1	0	1	1	9	9	0
D	D	M	M	Y	Y	Y	Y

性別
Sex:*

Male Female

婚姻状況
Marital Status:*

未婚 Single 既婚 Married 別居 Separated 離婚 Divorced 死別 Widowed 同棲 Cohabited 事実婚 Customary

配偶者の国籍 (未婚の場合下記選択不要)
Nationality/Citizenship of Spouse:*

シンガポール国籍 Singapore Citizen NRIC No.

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シンガポール永住者 Singapore Permanent Resident NRIC No.

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その他国籍 (詳細を記入) Others (Please Specify): JAPANESE

出生国
Country/Place of Birth:

C	H	I	N	A															
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出生都市
State/Province of Birth:

F	U	J	I	A	N														
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人種
Race: (e.g. Malay, Indian, Chinese, Caucasian, etc)

C	H	I	N	E	S	E													
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国籍
Nationality/Citizenship:

C	H	I	N	E	S	E													
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旅券の種類
Type of Travel Document Held:*

一般旅券 International Passport 外交旅券 Diplomatic Passport 公用旅券 Official Passport

特殊旅券→ Service Passport 身分証明書(日本発行の再入国許可書)↑ Document of Identity 身分証明書↑ Certificate of Identity

その他(詳細記入)→ Others (please specify)

旅券番号
Travel Document No.:

E	E	0	0	0	0	0	0	0											
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旅券発行日
Travel Document Issued Date:

2	8	1	2	2	0	2	2
D	D	M	M	Y	Y	Y	Y

旅券有効期限
Expiry Date:

2	7	1	2	2	0	3	2
D	D	M	M	Y	Y	Y	Y

旅券の発行国と都市
Country/Place of Issue:

J	A	P	A	N	T	O	K	Y	O										
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身分証明書番号 (中国籍の方のみ記入。番号ない方は全ての枠に「0」を記入してください)

For Chinese Nationals Only
PRC ID Number

X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Address in Country/Place of Origin/Residence 出生国の住所をご記入ください

国名
 Country/Place of Origin/Residence: C H I N E
 州/省/県
 Division/State/Province of Origin/Residence: F U J I A N
 市
 Prefecture of Origin/Residence: F U Z H O U
 区
 County/District of Origin/Residence: T A I J I A N G
 番地等の詳しい住所
 Address: 00-0000 XXXX XXXXXX TAIJIANG FUZHOU FUJIAN CHINA

PART II – OTHER DETAILS

Email Address: X X X X X @ T M - A . C O . J P
 電話番号
 Contact Number: 0 0 0 0 0 0 0 0 0 0 0
 職業
 ※別紙の選択肢より選んでください
 Occupation: C L E R I C A L W O R K E R
 最終学歴
 Highest Academic/Professional Qualifications Attained: *
 No Formal Education Primary Secondary Pre-University
現在小学生以下の方↓ 現在中学生の方↓ 現在高校生の方↓ 高校卒業の方↓
 Diploma University Post-Graduate
専門学校卒業の方↓ 大学卒業の方↓ 大学院卒業の方↓
 年収 (シンガポールドル)
 Annual Income in Singapore dollars (SGD): 3 5 0 0 0
 宗教
 ※別紙の選択肢より選んでください
 Religion: N O R E L I G I O N
 シンガポール入国日
 Expected Date of Arrival in Singapore: 1 5 - 0 4 - 2 0 2 3
※出発日ではなく入国日です※
 D D M M Y Y Y Y
 希望のビザ種類
 Type of Visa: * Single Journey Double Journey Triple Journey Multiple Journey
 渡航目的
 Purpose of visit: * Social Business
 渡航目的の詳細
 ※別紙の選択肢より選んでください
 Details of purpose: SOCIAL VISIT (FREE-AND-EASY TOUR)
 シンガポール滞在期間
 How long do you intend to stay in Singapore: * Less than 30 days More than 30 days
30日以内の滞在↓ 30日を超える滞在↓

If your intended stay in Singapore is more than 30 days, please state the reason for your intended length of stay and the duration

1回のシンガポール滞在期間が30日を超える場合、理由及び詳細を記入

Address in Singapore

滞在先の情報

Where will you be staying in Singapore?:*

近親者(親、兄弟)の家↓ 親戚の家↓ 友達の家↓ ホテル↓ その他(詳細を記入)

Next of Kin's Place Relative's Place Friend's Place Hotel Others (Please specify): _____

番地 階数 部屋番号 郵便番号
 Block/House No.: Floor No.: Unit No.: Postal Code:

1	0										0	1	8	9	5	6
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街路名 滞在先の電話番号
 Street Name: Contact No: +65 6688 8888

ホテル名やマンション名
 Building Name: MARINA BAY SANDS

直近5年間で出生国以外の国に1年以上住んでいますか？

Did you reside in other countries/places, other than your country/place of origin, for one year or more during the last 5 years ?*

Yes No

If yes, please furnish details Yesの場合のみ下記に詳細住所を記入

Period of Stay

Country/Place	Address	From	To
JAPAN	1-13-3-7F TORANOMON MINATO-KU TOKYO	2018	PRESENT

Details of Travelling Companion ※申請者が12歳以下の場合のみ記入

(Only for applicant who is 12 years old or less at the point of application. Details are not required if applicant is accompanied by an airline representative.)

申請者と同行者の関係

Relationship of Travelling Companion To Applicant:
 P A R E N T

同行者の名前 (パスポートに記載されている順番に記入)

Name:
 M I N A T O H A N A K O

同行者の生年月日

Date of Birth:
 0 1 — 0 4 — 1 9 6 0
 D D M M Y Y Y Y

同行者の性別

Sex:* Male Female

同行者の国籍

Nationality/Citizenship:
 J A P A N E S E

同行者のパスポート番号

Travel Document Number:
 T T 0 0 0 0 0 0 0 0

PART III – PARTICULARS OF LOCAL CONTACT**Details of Local Contact or Company/Hotel in Singapore** シンガポールでの連絡先 (ホテル名やV39Aに記載の会社名等)

会社名やホテル名

Name of Local Contact /Company/Hotel:

M	A	R	I	N	A		B	A	Y		S	A	N	D	S						

申請者との関係

Relationship of**Local Contact/Company/Hotel to Applicant:**

H	O	T	E	L		G	U	E	S	T											
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上記で記入した会社やホテルの電話番号

Contact No.: +65 6688 8888

上記で記入した会社やホテルのメールアドレス

Email Address: room.reservations@marinabaysands.com**PART IV – ANTECEDENT OF APPLICANT***

(a)シンガポールを含むいずれかの国から、入国拒否または国外退去を命ぜられたことがありますか？

(a) **Have you ever been refused entry into or deported from any country/place, including Singapore?** Yes No

(b)シンガポールを含むいずれかの国で、裁判により有罪判決をうけたことがありますか？

(b) **Have you ever been convicted in a court of law in any country/place, including Singapore?** Yes No

(c)シンガポール入国禁止処分を受けたことがありますか？

(c) **Have you ever been prohibited from entering Singapore?** Yes No

(d)古いパスポートまたは別名でシンガポールに入国したことがありますか？

(d) **Have you ever entered Singapore using a different passport or name?** Yes No

上記(a)~(d)の質問にyesで答えた方のみ詳細をご記入ください

If any of the answer is "YES", please furnish details below

PREVIOUS PASSPORT NUMBER G000000

PART V - DECLARATION BY APPLICANT

I declare that all information submitted in this application is true, accurate and complete to the best of my knowledge and belief. I understand that, if I have concealed relevant information or provided false, inaccurate or misleading information, I may be prosecuted and any facilities, rights or privileges granted under this application may be withdrawn.

I undertake not to misuse controlled drugs or to take part in any political or other activities during my stay in Singapore which would make me an undesirable or prohibited immigrant under the Immigration Act 1959.

I undertake to comply with the provisions of the Immigration Act 1959 and any regulations made thereunder or any statutory modification or re-enactment thereof for the time being in force in Singapore.

I undertake not to involve in any criminal offences in Singapore.

I undertake not to indulge in any activities which are inconsistent with the purpose for which the immigration passes have been issued

I further undertake not to be engaged in any form of employment, business or occupation whilst in Singapore without a valid work pass issued under the Employment of Foreign Manpower Act 1990.

I am aware that overstaying or working illegally in Singapore is a serious offence and on conviction, the penalties may include mandatory imprisonment and caning.

I understand that if the Controller of Immigration is satisfied that I or any member of my family breaches this undertaking or becomes an undesirable or prohibited immigrant, he will cancel my immigration pass and the passes of the members of my family, and we may be required to leave Singapore within 24 hours of such cancellation.

I understand that this application for and possession of a visa does not guarantee entry into Singapore and permission to entry is entirely discretionary at the point of entry.

I give my consent for your department to obtain and verify information from or with any source as you deem appropriate for the assessment of my application for immigration facilities.

記入した日付

18/03/2023

Date

パスポートと同じサイン

※必ず手書きで電子サイン、パスポートと違うサイン不可

Signature of Applicant