



SERVICE REQUEST FORM/QUESTIONNAIRE

Name of Client:

Address:

Telephone No: **Email address:**

Age: **Marital Status:** **Qualification:**

Occupation: **Current qualification:**

Employment type (if employed): **Employee or Self Employed**

Registered Company? (if self employed) Yes or No

Service requested:

Travel History (include visa refusals):

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Current Travel need/preferred destination:

Availability of Bank Statement? : Yes or No:

Sponsorship: (Self or 3rd party)

Desired date of job commencement:

I confirm that the above information provided by me is reliable and correct as Pa-Solo Worldwide Travels & Tourism Ltd with its representatives and affiliates will not bear any liability or losses arising from my negligence and provision of false information.

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Full Name of Client

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Client's Signature & Date