

SOUTH AFRICAN HIGH COMMISSION

Islamabad - Pakistan

CHECK-LIST FOR A MEDICAL TREATMENT VISA

01 Duly completed and signed Visa Application Form (DHA-1738) Form 8 02 A recent photograph 03 Original passport valid for no less than 30 calendar days after expiry of the intended stay 04 Visa Fee Rs 5,300.00 (non-refundable) 05 A yellow fever vaccination certificate (where applicable) A letter from the applicant's registered medical practitioner or medical institution within the confirming- (a) That space is available at the medical institution; (b) The estimated costs of the treatment; (c) Whether or not the disease or ailment is treatable or curable; 	ie Republic,	
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(d) The treatment schedule; and(e) The period of intended treatment in the Republic.		
 The details of, and confirmation by, the person or institution responsible for the medical examples and hospital fees: Provided that in a case where the applicant's medical scheme or employ liable for expenses incurred, proof of financial means to cover medical costs 	•	
08 The particulars of the persons accompanying the applicant		
09 A valid return air flight ticket, where applicable		
10 Proof of sufficient financial means or provision for the costs indirectly related to the treatm	nent	
Additional Documents	Yes	No
11 Copy of applicant's CNIC (birth certificate in case of minor) and Bio-page of the passport		
12 Previous passports (10 years travel history where applicable)		
13 Medical history		
14 Referral letter from a doctor or an hospital		

Notes:

- All documents in a foreign language must be translated into English by a sworn translator.

— The Mission may further request additional documents / information where and when necessary.

I ______ fully understand the requirements and aware that failure to meet the said requirements as contemplated in terms of Immigration Policy my application may lead to refusal.

Date:_____

Signature:_____