

Date:

To,
The Visa Officer
Embassy of
Address:

Subject: Application for Medical Treatment Visa

Dear Sir/Madam,

I am writing to apply for a Medical Treatment Visa to travel to for the purpose of undergoing medical treatment. The details of my application are as follows:

Applicant's Name:
Passport Number:
Date of Birth:
Nationality:
Contact Information:

Medical Condition Requiring Treatment:
Medical Institution / Hospital in :
Duration of Treatment:
Accompanying Person(s) (if any):

I have enclosed the required medical documents, doctor's recommendation, and correspondence from the hospital/institution in . I respectfully request you to kindly consider my application and grant me a visa for the duration of my treatment.

Thank you for your consideration.

Yours sincerely,
Name:
Signature: