

## **Additional requirements for applicants travelling for the purpose of medical treatment**

- A letter from the medical institution or doctor in the Member State of destination indicating the following:
  - The contact with the local doctor;
  - Nature of the treatment;
  - Estimated time for recovery;
  - The need for return visits;
  - The cost of treatment;
  - The mention that the patient is accepted;
  - The indication that the treatment can be performed;
  - The indication that the medical institution or doctor agrees with the intended method of payment.
- A letter drafted and signed within the last 3 months by the applicant's treating doctor in Kenya providing background information about the medical treatment and confirming the need of specific medical treatment to be provided abroad.
- Recent bank statement covering the last three months.
- Proof of pre-payment of the treatment or other proof of sufficient financial means to cover the medical treatment [and related expenses].
- Proof from the Medical Institution showing that it agrees with your intended method of payment.
- Employed persons: a dated and signed letter from the [current] employer containing the following information:
  - The employed person's personal data, function or profession;
  - terms of employment (temporary or permanent);
  - number of years of employment ;
  - granted leave days;
- Self-employed persons: copy of Kenya PIN Certificate,
- If available, bank statement for business account (for the last three months).
- If you are retired please submit documents proving your pension or other financial support.