

1) USE A DARK / BLACK PEN TO FILL OUT THE FORM – Light pens don't scan well and the passport office may reject your form

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Republic of Sierra Leone
APPLICATION FOR PASSPORT

Ministry of Internal Affairs (Immigration Dept)

2) Check This Box and Date form

Ordinary Service Diplomatic

3) Do NOT Attach Picture To The Form

Photograph (Facia

PLEASE PASTE
DO NOT STAPLE

Date of Application: 1ST NOVEMBER 2012

Applicant's Family Name: P O E

Applicant's Firstname: JOHN

Other Names: M U S A

Applicant's Profession: TEACHER

Date of Birth: 01 01 1980 Sex: M F Height: 165 cm

Place of Birth: KENEMA, SIERRA LEONE

Address: 500 MEMORY LANE, LEXINGTON, KY 40101 USA

4) List City AND Country You Were Born In

5) Use Current Residential Address – Do NOT Use PO Box

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Applicant's Signature

John Doe

6) Press Firmly AND Center Your Signature. Faint Or Off Center Signatures May Be Rejected By The Passport Office

FOR OFFICIAL USE ONLY

Approved By.....

Received By.....

Date.....

Date.....

File Reference No.....

Application No.....

N R A
 NON-TAX REVENUE DEPT.
 PASSPORT FORMS SALE
 COLLECTOR
 SIGN _____
 DATE _____

FORM E
Application For Replacement of Passport

This Form must be completed in ink by all Applicants
 Enclose Two Passport Pictures

7) Use same address as prior page

8) Use same address as prior page

9) Insert current passport # here

10) Insert issue date of current passport here – even if it has expired

1. PARTICULARS OF APPLICANT

SURNAME: _____ (State Mr., Ms. or Title): <u>MR. DOE</u> Other Names in Full: <u>JOHN, MUSA</u>	PERSONAL DESCRIPTION Occupation: <u>TEACHER</u> Height: <u>5</u> ft. <u>5</u> ins Colour of eyes: <u>BROWN</u> Colour of hair: <u>BLACK</u> Visible Peculiarities: <u>NONE</u>
Place and Country of Birth: <u>KENEMA, SIERRA LEONE</u> Date of Birth: <u>1ST JANUARY 1980</u> Present Address: <u>500 MEMORY LANE</u> <u>LEXINGTON KY 40501 USA</u>	

2. NAME AT TIME OF ISSUE: _____
if different from above give reasons for change of name (attach relevant documents): _____

 I hereby apply for the replacement of the ~~attached~~ ~~expired~~, ~~exhausted~~, ~~damaged~~, ~~lost~~ or ~~undesired~~ (cross out whichever is not applicable). If undesired give reasons for change of Passport and attach relevant documents:

 Passport Number: 1234567 issued to me or to Mr./Ms. (if you are a proxy)
 at FREETOWN on 21ST JANUARY 2002

3. TO BE COMPLETED IF CHILDREN ALREADY INCLUDED ON PASSPORT
 (Not applicable to children over 16 years of age require a separate Passport)

Full Names (including Surname)	Place, Country, Date of Birth and Sex
_____	_____
_____	_____

4. TO BE COMPLETED IF PASSPORT NOT AVAILABLE FOR REPLACEMENT

Circumstances in which Passport was lost: _____

 Reasons for its non availability: _____
 Place and date of loss: _____
 Has report been made to the Police (Yes/No). If so, where and when: _____

11) Only Fill Out This Section If You Lost Your passport. Otherwise Leave Blank

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