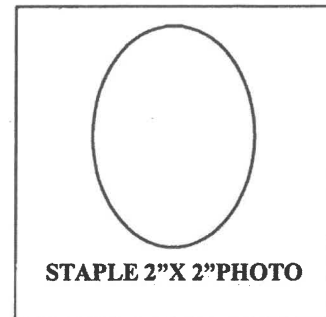




# Office of the Attorney General, RMI

## APPLICATION FOR RMI PASSPORT

Type or print all capital letters in blue or black ink in white areas only)



1. NAME (First and Middle)

LAST

2. MAIL PASSPORT TO: STREET/RFD # OR P.O.BOX APT. #

CITY STATE ZIP CODE

3. MARITAL STATUS [ ] Single [ ] Married [ ] Divorced 4. SEX Male [ ] Female [ ] 5. PLACE OF BIRTH Atoll or Island Country 6. DATE OF BIRTH Month Day Year 7. SOCIAL SECURITY NUMBER

8 HEIGHT 9 HAIR COLOR 10. COLOR OF EYES 11. HOME TELEPHONE 12. BUSINESS TELEPHONE 13. OCCUPATION

14. PERMANENT ADDRESS ( DO NOT LIST P.O.BOX) STREET/R.F.D.# CITY STATE ZIP CODE

15. FATHER'S FULL NAME Last First 16. BIRTH PLACE Atoll or Island Country 17. BIRTH DATE Month Day Year 18. RMI CITIZEN [ ] Yes [ ] No

18. MOTHER'S FULL MAIDEN NAME 20. BIRTH PLACE Atoll or Island Country 21. BIRTH DATE Month Day Year 22. RMI CITIZEN [ ] Yes [ ] No

23. HAVE YOU EVER BEEN MARRIED YES [ ] NO [ ] 24. DATE OF MOST RECENT MARRIAGE Month Day Year 25. SPOUSE'S or FORMER SPOUSE'S FULL NAME

26. EMERGENCY CONTACT (If you wish, you may provide the name, address & telephone no. of the person not traveling with you to be contacted in case of emergency) Name Address State Zip Code Telephone No.

27. HAVE YOU EVER BEEN ISSUED AN RMI PASSPORT? [ ] Yes [ ] No If yes, complete next line and submit passport if available DISPOSITION NAME IN WHICH ISSUED MOST RECENT PASSPORT NUMBER APPROXIMATE DATE ISSUE Month Day Year [ ] Submitted [ ] Stolen [ ] Lost [ ] Others

It is necessary to submit a statement with an application for a new passport when a previous valid or potentially valid passport cannot be presented. The statement must set forth in detail why the previous passport cannot be presented.

28. Father's Identifying Documents [ ] Drive's License [ ] Passport [ ] Other (specify) Date Issue Expiration Date Place of Issue Name: I.D. No. 29. Mother's Identifying Documents [ ] Drive's License [ ] Passport [ ] Other (specify) Date Issue Expiration Date Place of Issue Name: I.D. No.

Applicant's Signature Date Parent's/Legal Guardian's Signature Date 14 years and older Under 14 years old

( Signature of Notary Public ) Date [ ] Clerk of Court: Location [ ] Passport Agent [ ] Postal Employee [ ] Vice Counsel RMI

Notary Seal

30. FOR ISSUING OFFICE USE ONLY (Applicant's evidence of citizenship) [ ] Birth Certificate [ ] SR [ ] CR [ ] City File/Issued: [ ] Passport Bearer's Name: [ ] Report of Birth [ ] Naturalization / Citizenship Certificate No. Issued: [ ] Others [ ] Seen & Returned: [ ] Attached:

31. FEE EXEC EF Others