



EMERGENCY TRAVEL CERTIFICATE FORM

***COMPLETE THE APPLICATION FORM IN ITS ENTIRETY. FAILURE TO DO SO COULD
DELAY THE ISSUANCE OF YOUR TRAVEL DOCUMENT***

Name of Bearer: _____

Home Address: _____

Email Address: (Required) _____

Expected Date of Travel: __/__/____ Purpose for Travel: _____

Occupation: _____

Date of Birth [DATE: ____] [MONTH IN WORDS: _____] [YEAR: ____]

Place of Birth: TOWN _____ COUNTRY _____

Height: _____ National Status: _____

Traveling To: _____

VIA / TRANSITING AT: _____

PARTICULARS OF PASSPORT

Passport Number: _____ Date of Issue: __/__/____ Date of Expiry: __/__/____

Place of Issue: _____

Reason for Unavailability of Passport: _____

If lost, has the loss been reported to the POLICE: _____

If Yes, When: __/__/____ If no, why not _____

**IT IS THE RESPONSIBILITY OF THE APPLICANT TO CHECK WHETHER THE E.T.C. IS ACCEPTED BY THE
COUNTRY OF TRANSIT AS FEES ARE NOT REFUNDABLE**

Telephone number: _____ Applicant Signature: _____

Requirements

1. Two Passport Size Photos
2. Copy of old Passport or Birth Certificate
3. Fee of US\$100 (Money Order ONLY)
4. Prepaid Self Address Envelop (Express/Next Day Delivery)

FOR OFFICIAL USE ONLY

Approving Officer: _____ Signature: _____

Date: __/__/____ Fee: _____ Receipt No. _____