

APPLICATION FOR AN EMERGENCY TRAVELLING CERTIFICATE APPENDIX NO.34 TO FORCE ORDERS 1955

FEDERATION OF NIGERIA

- 1. (a) SURNAME: _____
 - (c) OTHER NAMES: _____
 - (d) DATE OF BIRTH: _____

| 2 | PLACE OF BIRTH | TOWN /VILLAGE | L.G.A | STATE |
|---|------------------------|----------------|-----------|---------------------|
| | | | | |
| | | | | |
| | | | | |
| 3 | FAMILY PARTICULARS: | NAME OF FATHER | NATIVE OF | PRESENT WHERE ABOUT |
| | TARTICULARS. | | | |
| | | | | |
| | | NAME OF MOTHER | NATIVE | NUMBER OF CHILDREN |
| | | | | |
| | | | | |
| | | | | |

| 4. | | | |
|----|---------------------------|--|--|
| | OCCUPATION AND EDUCATION | | |
| A. | Occupation | | |
| B. | Business Address | | |
| C. | Residential Address | | |
| D. | Last School Attended | | |
| E. | Educational qualification | | |

5.

| 5. | | FINANCE |
|----|-----------------------------|---------|
| A. | Financial Resources | |
| В. | Particulars of any property | |

| 6. | | |
|----|--------------------------------------|--------------------------------|
| | COUNT | RY FOR WHICH E.T.C IS REQUIRED |
| А. | Which country do you wish to travel? | |
| В. | Have you ever been there? | |
| C. | If so, when? | |

7.

| Give the name of a relative or friend in the country you wish to travel to: | | | | |
|---|------|------------|---------|--|
| | NAME | OCCUPATION | ADDRESS | |
| А | | | | |
| В | | | | |

| 8. | PURPOSE OF JOURNEY | | | | |
|---------|--------------------|---|--|--|--|
| | (a) | What is the object of your journey | | | |
| | | | | | |
| | | | | | |
| | (b) | What is your intended address | | | |
| 9. | MO | DE OF TRAVEL | | | |
| | a. | In what manner do you propose to make your journey? | | | |
| | b. | By Ship | | | |
| | c. | By Land | | | |
| | d. | By Air | | | |
| | e. | What class of ticket do you intend to purchase? | | | |
| | | 1st2nd3rdDeck | | | |
| | f. | When are you departing | | | |
| | | certify that I understand the contents of this application form and that the particulars furnished by me are true and I make this declaration conscientiously and by virtue of the Oaths Act of 1963. | | | |
| | DA | TESIGNATURE | | | |
| 11. Dec | clarat | ion by Referee (must be citizen of Nigeria and copy of pages 1-5 of Referee's passport mybe required.). | | | |
| | | nfirm that this form has been fully completed. The description above and attached photographs are correct abd true ness of | | | |
| | Mr/ | Mrs/Miss | | | |
| | Sig | natureDate | | | |
| (Names | in B | lock letters) | | | |
| Occupa | tion: | | | | |
| Address | : | | | | |
| Telepho | ne N | umber: | | | |
| | | | | | |

FOR OFFICIAL REMARKS