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EMBASSY OF THE  
REPUBLIC OF GHANA  
STAVANGERSTRASSE 17 & 19  
10439 BERLIN

*In case of reply the  
number and date of this  
letter should be quoted*

**APPLICATION FORM FOR CONSULAR IDENTITY CARD**

**A. PERSONAL DETAILS**

1. Surname: .....
2. First Name: .....
3. Date & Place of Birth: .....
4. Home Town: .....
5. Name of Father: .....
6. Name of Mother: .....
7. Passport Number: .....
8. Place of Issue: .....
9. Name & address of next of Kin: .....

**B. OTHER DETAILS**

1. Address in Germany: .....
- (preferred mailing address) .....
2. Occupation (present): .....
3. Tel. No.: .....
4. E-mail: .....

Signature:

Date: .....

*NB. Information provided will be treated as confidential.*

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**FOR OFFICIAL USE ONLY**

ID Control Officer: .....

Date: .....