

EMBASSY OF NIGERIA, KINSHASA
APPLICATION FOR EMERGENCY TRAVEL CERTIFICATE

NAME.....

DATE OF BIRTH.....

PLACE OF BIRTH.....

PROFESSION.....

ADDRESS/TEL. N° IN CONGO.....

.....

ADDRESS IN NIGERIA (Include Hometown/Village).....

.....

VILLAGE

HOMETOWN

LOCAL GOVERNMENT AREASTATE

NAME OF FAMILY MEMBER IN NIGERIA (**Mandatory**).....

ADDRESS.....

TEL N°.....

DATE OF ARRIVAL IN DRC..... PURPOSE.....

PASSPORT N°. PLACE OF ISSUE (**Mandatory**).....

DATE OF ISSUE EXPIRATION DATE.....

DATE OF LOSS/MISPLACEMENT / PLACE.....

IF EXPIRED, STATE DATE/MONTH

IF PASSPORT IS LOST, DESCRIBE THE CIRCUMSTANCE OF THE LOSS.....

.....

.....

SIGNATURE DATE

ATTACH THE FOLLOWING:

TWO PASSPORT PHOTOGRAPHS
POLICE REPORT OF LOSS OF PASSPORT/COURT AFFIDAVIT
ONE WAY TICKET TO NIGERIA
ETC APPLICATION FEE
DATA PAGE OF PASSPORT COLORED

OFFICIAL USE:

APPROVED/NOT APPROVED