

Article 10 – Notification of Arrival and Application Form For Diplomatic Identity Card

Issued by Protocol Department of Foreign Affairs Iveagh House 79 St. Stephens Green Dublin 2

Please read notes below before completing this form

$\begin{array}{c} \textbf{Section 1-Photograph and Signature -} \textit{ This section must be completed by all } \\ \textit{applicants} \end{array}$

Please attach a good quality recent colour photograph. The box provided represents the size of the photograph required.

PLEAS AFFIX PHOTO HERE)				
			ase provide a sample of you must be contained within t	he box	provided
Section 2 – Perso	nal Details - 7	his sec	tion must be completed by a	ll applio	eants
Name of Mission				_	
Title	Mr /Mrs/ Miss / Ms		Date of Birth		
Other (Please Specify)	IVIS	_		-	
First Name (s)				_	
Surname				_	
Place of Birth		_	Current Nationality		
Date of Arrival in Ireland		_	Nationality at Birth		
Address of Residence			Temporary		Permanent
Mother's Maiden Name					

N.B. You are required to notify Protocol Division, Department of Foreign Affairs of any change of personal address during your posting in Ireland.

Section 3 – Posting Details - <i>This s mission.</i>	section is to be completed	by staff employed in	the
Grade and area of responsibility	Date of taking up Embassy	duty in	
Name of officer you are replacing in Embassy	Date and point of	f arrival	
Location and date of last foreign posting			
Do you currently hold a Diplomatic Identity Card issued by this Office	Yes [If yes, please e	□ No □ enclose the previous c cancellation	eard for
N.B. Diplomatic Identity Cards must be retato Ireland.	urned to Protocol Division	on at the end of your	posting
Section 4 – Staff Category - This semission.	ection is to be completed	by staff employed in	the
Staff Category Head of Mission Counsellor First Secretary Second Secretary Third Secretary Other Special	lease ify		
Section 5 - Spouses and Depende This section is only to be completed where the a employed in the mission.		ependent of a member	r of staff
Please indicate whether this application refers t dependent.	Spouse		
иерениет.		Dependent	
Please supply details of the staff member throug	gh which this application	is made.	
Title Mr /Mrs/ Miss / M Other (Please Specify)		h	
Place of Birth			
First Name			
Surname			
Maiden Name			
Mother's Maiden Name			

Please indicate the category of th	e staff membei	r through which this application is made.
F Seco	d of Mission Counsellor irst Secretary ond Secretary ird Secretary Other	
Section 6 – Diplomatic	List Deta	ils
Position in List	after:	
Name & title to be printed		
are those of the applicant. I unde appointment in Ireland is termina Department any loss/theft of the i	the attached p rtake to return ted. I understa	hotograph and the signature on this application form the identity card to the Department when my and the importance of immediately reporting to the
Signature of Applicant		
	Diplomatic Mi	ission Stamp/Seal

Notes

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- 1 This form should only be used by one of the following:
 - a. Diplomatic staff
 - b. Spouses of Diplomatic staff
 - c. Dependents of Diplomatic staff.

Dependents Diplomatic Identity Cards are restricted to applicants between the age of sixteen (16) and twenty-one (21). This can be extended to the age of twenty-five (25) where the dependent is a full time student. Where this extension is being applied for, the completed application must be accompanied by a Third Party Note to that effect.

3 Section 6 is to be signed by the Applicant.

Supporting Documents

- Diplomatic Passports must be submitted with the application.
- An original passport must be presented before ID will be issued. Photocopies are not acceptable.

For Protocol Use Only					
Date Application Received (Stamp)					
Identity Card Number	Serial No:				
Valid Until					
Passport Number & Type					
Date of Issue					
Passport Expiry Date					
Other					