



APPLICATION FOR PASSPORT AMENDMENT

APPLICANT INFORMATION

Last Name		
Given Name	Middle Name	
Previous Passport Number	Date of Issue	Place of Issue
New Passport Number	Date of Issue	Place of Issue
IC Type <input type="checkbox"/> NRIC <input type="checkbox"/> E Pass <input type="checkbox"/> Dependant Pass <input type="checkbox"/> Work Permit <input type="checkbox"/> S Pass	IC / NRIC Number	
Address		
Phone Number	Email	

INFORMATION FOR AMENDMENT / CORRECTION

Change from to

Change from to

Change from to

Change from to

I certify under oath that all of the information are truthful, complete and correct, and that all of my documents are authentic and valid.

.....
Applicant's Signature over Printed Name

PASSPORT RECEIVED :

Date :

PROCESSOR'S REMARKS	
Date:	Processor initials:
PPT OFFICER'S APPROVAL	
Initials:	Date:
DATE OF AMENDMENT:	
Embassy Seal	Signing Official