



APPLICATION FOR PRESS ACCREDITATION

(FOREIGN CORRESPONDENTS)

Please complete form in block letters:

1. Surname:
2. First/Middle names:
3. Other names (if any):.....
4. Age :.....(b) Date of Birth:.....
5. Place of Birth:.....
6. Nationality:.....
7. Previous Nationality (if any):.....
8. Passport Number:
9. Passport Expiry Date:.....
10. Address in Ghana: Tel. No.:.....

In the event of change of address in Ghana, please notify the Director of Information services in Accra. Tel.: 228011 Ext. 149, 222-483 (Direct) Fax No.222-483 (Direct)

11. Permanent Address:.....
.....
12. Tel. no:
13. Purpose of visit:.....
14. Duration of visit: (a) No. of Days:(b) From:To:
15. Mode of travel to Ghana:
16. Mode of travel from Ghana:.....
17. Entry point from Ghana:
18. Details of Press Cards: (a) Organisation:
- (b) Date of issue:
- (c) Card Number:

19. Present Employers:

20. Previous Employer:

21. Have you ever visited Ghana (if so when, give details or Dates, Places Visited, Interviews)
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.....

22. Residential Address of previous visits:

23. Country visited in Africa:

24. Other Countries visited:

25. In which publications/Programmes have your articles/pictures etc. been published?
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.....

26. Have you had any problems with Authorities in any country you have visited? (if yes, give details)
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27. List your equipment and their serial Nos. for Identification (In case of Loss/Misplacement)

28. Date:
.....

29. Signature of Applicant:
.....

30. Date:
.....

31. Signature of Receiving Officer:
.....

FOR OFFICIAL USE ONLY

The Hague Mission's Remarks: Accepted/Rejected

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