



REPUBLIC OF SOUTH SUDAN
Ministry of Interior
Directorate of Nationality, Passports & Immigration



Application for South Sudanese Emergency Travel Document
Form No. 3C **AETD**

1. Required Data:

Place of Application: _____ Date (DD/MM/YYYY): ____/____/20 ____

2. Reason for application: _____

3. Personal Data:

Sex: Male ☐ Female ☐

Surname: _____

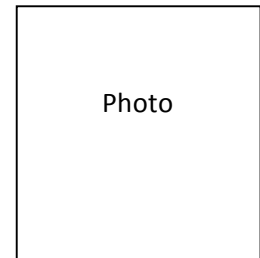
Given Names: _____

Father's Names: _____

Full Mother's Name: _____

Marital Status: Single ☐ Married ☐ Divorced ☐ Widowed ☐

Spouse's Name (If married): _____



4. Data of Birth:

Place of Birth: _____

Place of origin: State: _____ County: _____ Payam: _____

Date of Birth (DD/MM/YYYY): ____/____/____

5. Statement of Nationality:

Type of Nationality: Birth ☐ Naturalization ☐ Naturalization through Marriage ☐

Nationality No: _____ Date of Issue (DD/MM/YYYY): ____/____/20 ____

Place of Issue: _____ Personal No. _____

6. Previous Passport: No. ☐ Yes ☐ (Give details below)

Passport No.: _____ Date of Issue (DD/MM/YYYY): ____/____/20 ____

Place of Issue: _____ Expiry Date: ____/____/20 ____

Passport Type: Regular ☐ Diplomatic ☐ Special ☐ Business ☐

7. National ID No.: _____

8. Professional Data:

Occupation and Name of organization: _____

9. Demographic Data:

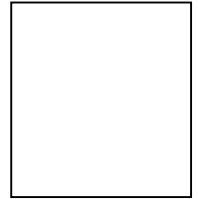
Residential Address: _____

State: _____ County: _____ Payam: _____

10. Confirmation of Data Validity:

I, _____, confirm that
the information provided is true and correct.

Signature of Applicant: _____



Fingerprint of Applicant

11. Witness:

Full Name: _____

ID/Passport No.: _____ Personal No: _____ Date of Issue: ____/____/____

Residential Address: _____

For Official Use

12. Fees Payment Data:

Fees: _____

Date of Receipt: ____/____/20____

Receipt No.: _____

Name, signature and stamp of accountant: _____

13. Emergency Travel Document Number: _____

Date of issue: _____ Place of Issue: _____

Rank and Name: _____

Signature and stamp: _____