Macao Consular Identity Card
Application Form

This form must be completed (in **<u>BLOCK LETTERS</u>** and in **<u>BLACK INK</u>**) for each applicant
and sent by mail to the Office of the Chief Executive of the Macao SAR
Address: Avenida da Praia Grande, Macao SAR
Tel: (853) 2872 6886

Mission	

PASSPORT DETAILS AND PERSONAL PARTICULARS

Surname		**Recent Photo**
Middle Name		
Given Name		*Size: 35mm x 45mm, Coloured, and in white background*
Post Title / Status	☐ Consul General or ☐ Head of Mission (for EU) ☐ Honorary Consul ☐ Deputy Consul General ☐ Consul ☐ Vice Consul ☐ Attaché ☐ Counsellor (for EU) ☐ Family Member of: _____ (one shall not take any paid employment, or else one shall declare the renunciation of the privileges and immunities to the Macao SAR government through the mission)	

Passport Type	☐ Diplomatic	☐ Official	☐ Ordinary	☐ Others:_____

Passport No.		**Sex**	☐ Male	☐ Female

Expiry Date	_____ / _____ / _____ dd mm yyyy	**Date of Birth**	_____ / _____ / _____ dd mm yyyy

Attachment	☐ Passport copy (including passport cover, biodata and visa pages; for visa-free countries, please provide entry permit)

AUTHORIZATION AND DECLARATION

I, the undersigned, authorize the Office of the Chief Executive, the Government Headquarters Affairs Bureau and the Identification Services Bureau of the Macao SAR to have the passport information for issuing the Consular Identity Card.

Signature of the applicant

(Signature **<u>MUST NOT</u>** exceed the inner limit of the box)

FOR OFFICIAL USE ONLY

Application Ref. Number | **C** |

Officer [____] **Date** [____]

Remark:

Date: _____ / _____ / _____   Authorized Signature and Seal of Mission
      dd   mm   yyyy

ALL INFORMATION CONTAINED IN THE APPLICATION FORM WILL NOT BE DISCLOSED TO ANY OTHER ORGANISATION EXCEPT THE OFFICE OF THE CHIEF EXECUTIVE AND THE IDENTIFICATION SERVICES BUREAU OF THE MACAO SAR