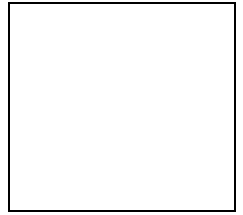


**EMBASSY OF THE REPUBLIC OF LIBERIA  
ABUJA, FEDERAL REPUBLIC OF NIGERIA**

PLOT 352 CADASTRAL ZONE AO, INDEPENDENCE AVENUE, NEAR UN HOUSE, CENTRAL BUSINESS DISTRICT, ABUJA, FCT  
Tel:+234-9-870-0017, Email:liberiaembassyabuja@ymail.com



**REGISTRATION FORM FOR CONSULAR IDENTITY CARD**

Please print or type and submit with two passport size photos

1. (a) Surname: \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Previous Name (s) (if applicable) \_\_\_\_\_ b) Gender M ( ) F ( )

(c) Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
MM / DD / YY

(d) Nationality \_\_\_\_\_ (e) Former Nationality (if any) \_\_\_\_\_

(f) Marital Status: Single ( ) Married ( ) Separated ( ) Divorced ( ) Widowed ( )

2. (a) Occupation \_\_\_\_\_ Employer \_\_\_\_\_

3. (a) Date of Arrival in Nigeria/Benin/Equatorial Guinea \_\_\_\_\_

(b) Purpose of Stay \_\_\_\_\_ Current Legal Status \_\_\_\_\_

(c) Residential Address \_\_\_\_\_

(d) Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

(e) Permanent Address \_\_\_\_\_

3. Names of family members/dependents currently resident with you (if applicable)

1. Name _____	Relationship _____
2. Name _____	Relationship _____
3. Name _____	Relationship _____
4. Name _____	Relationship _____
5. Name _____	Relationship _____

4. Applying for Consular Identity Card for: Self ( ) and/or Family Members ( )  
(Please specify)

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5. Names and Address of two persons who can serve as references:

1. Name \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

I attest that the above information is accurate to the best of my knowledge. I understand that any false information provided on this form may result to an outright rejection of my application for a Consular Identity Card.

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM/ DD/ YY