



CONSULATE GENERAL OF BANGLADESH

131 WEST 33RD STREET, SUITE# 6A, NEW YORK 10001, USA
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E-MAIL: contact@bdcgny.org, WEB - www.bdcgny.org

APPLICATION FOR AMENDMENT OF RECORD ON PASSPORT

PLEASE TYPE OR PRINT IN BLOCK LETTERS.

UNLESS OTHERWISE MENTIONED, PLEASE COMPLETE ALL ITEMS OR WRITE "N/A" (NOT APPLICABLE) IF NEEDED.

1. Name of applicant _____ 2. Date of birth _____ (e. g. 26-Mar-1971) 3. Passport # _____

4. Place of issue _____ 5. Date of issue _____ (e. g. 26-Mar-1971) 6. Date of expiry _____ (e. g. 26-Mar-1971)

7. Present address Street _____ House/Apt # _____ City _____

State _____ Zip code _____ Home Tel: _____ Cell: _____

8. Service Priority Ordinary Urgent

9. a. Please cross (X) the item you would like to amend: Name of Bearer Name of Father Name of Husband
 Profession Place of Birth Date of Birth Height Visible Distinguishing Marks Permanent Address
 Present Address Other (please specify) _____

9. b. Exact description in your current passport:

9. c. Amendment requested [What exactly should appear on your passport]

[Please submit supporting documents]

10.a. Money order # _____ 10.b. Issued by _____ 10.c. Amount in US \$ _____

11. Declaration

I declare upon solemn oath that all information given on this applicaiton are true, correct and complete. I understand that I am subject to prosecution if I have given any false information.

Date _____ (e. g. 26-Mar-1971)

Signature of the applicant

FOR OFFICIAL USE ONLY.

Receipt # _____ Date _____ (e. g. 26-Mar-1971) Amount (US\$) _____

Mode of Service Mail-In Walk-In Received by _____ Processed by _____

Comments _____ Signature of the issuing authority _____

Date _____ (e. g. 26-Mar-1971) Date _____ (e. g. 26-Mar-1971)