UNITED NATIONS  NATIONS UNIES

**REQUEST FOR TEMPORARY PASS (BROWN) – LANGUAGE COURSE**

***Application must be accompanied by a UN language course confirmation***

**I request a United Nations photo identification card for my:**

**Husband**  **Wife**

Staff Member’s information:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last Name: |  | | | | | | | | | First Name: | | | |  | | | | | | | | | Middle initial: | | | |  |  |
| Date of Birth (dd/mm/yyyy): | | | | | |  | | | | Nationality: | | | | |  | | | | | | | | Gender:  M F | | | | |  |
| Address at Duty Station: | | | | |  | | | | | | | | | | | | | | | | | Tel. No.: | | |  | | |  |
| Other address: | | |  | | | | | | | | | | | | | | | | Other Tel. No.: | | | | | |  | | |  |
| Currently serving in New York | | | | | | | | Temporarily assigned to other Duty Station (specify): | | | | | | | | | | | | |  | | | | | | |  |
| Index No.: | |  | | | | Grade & Step: | | |  | | | | Title: | | |  | | | | | | | | | | | |  |
| Type of Contract: | | | | Permanent | | | Fixed-Term | | | | Expiration Date: | | | | | | |  | | | | | |  | | | |  |
| Dept./Div./Section: | | | |  | | | | | | | | Extension: | | | | |  | | | Room No.: | | | | | |  | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |

# Family Member’s information

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last Name: | |  | | | | | | | | | | | | First Name: | |  | | | | | Middle initial: | | |  |  |
| Date of Birth (dd/mm/yyyy): | | | | | |  | | | | | | | Nationality: | |  | | | | | | Gender:  M  F | | | |  |
| Weight: |  | | | | Height: | | | |  | | | Hair Colour: | | |  | | | Eye Colour: | |  | | |  | |  |
| Address at Staff Member’s duty station: | | | | | | | | | |  | | | | | | | | | | | | | | |  |
| Telephone No.: | | | |  | | | |  | | | | | | | | | | | | | | | | |  |
| Other address: | | |  | | | | | | | | | | | | | | | | Other Tel. No.: | | |  | | |  |
| Date of issuance of G-4 visa: | | | | | | |  | | | | Signature of Family Member: | | | | | |  | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | |  |

*I certify that the above information is accurate.*

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Staff Member: |  | Date: |  |

**Application must be accompanied by a UN language course confirmation. Expiration date at end of course term.**

The information provided by the staff member and the family member is consistent with the information on file, and with the information contained in the family member’s passport.

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|  |  |  |  |
|  | Name and Signature of Executive Officer |  | Date |