

# APPLICATION FOR PRESS ACCREDITATION

(FOREIGN CORRESPONDENTS)

**Please complete form in block letters:** (REMEMBER TO ATTACH TWO PASSPORT PICTURES)

1. Surname:.....
2. First/Middle names:.....
3. Other names (if any):.....
4. Age:.....(b) Date of Birth .....
5. Place of Birth:.....
6. Nationality:.....
7. Previous Nationality (if any).....
8. Passport Number:.....
9. Passport Expiry Date:.....
10. Address in Ghana:.....
11. Tel. No.:.....  
In the event of change of address in Ghana, please notify the Director of Information services in Accra. Tel.: 228011 Ext. 149, 222-483 (Direct) Fax No. 222-483 (Direct)
12. Permanent Address:.....
13. Purpose of visit:.....
14. Duration of visit:.....(a) No. of Days:.....(b) From:.....To:.....
15. Mode of travel to Ghana:.....
16. Mode of travel from Ghana:.....
17. Entry point from Ghana:.....
18. Details of Press Cards :
  - a. (a) Organization:.....
  - b. (b) Date of issue:.....
  - c. (c) Card Number:.....
19. Present Employers:.....
20. Previous Employer:.....
21. Have you ever visited Ghana (if so when, give details or Dates, Places Visited, Interviews) .....
22. Residential Address of previous visits:.....
23. Country visited in Africa:.....
24. Other Countries visited:.....

25. In which publications/Programmes have your articles/pictures etc. been published?

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26. Have you had any problems with Authorities in any country have you visited?(if yes, give details).....

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27. List your equipment and their serial Nos. for Identification (In case of Loss/Misplacement).....

28. Date: Date:

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31. Signature of Applicant:

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32. Signature of Receiving Officer

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FOR OFFICIAL USE ONLY

Mission's  
Recommendations.....

Remarks: Accepted Rejected