



CITY OF FRANKFURT (ODER)
 THE MAYOR
 PF 1363, 15203 Frankfurt (Oder)



Note on data protection § 86 German Residence Act (AufenthG) collection of personal data:
 The authorities charged with the execution of this Act may collect personal data for the purposes of implementing this Act and provisions relating to foreigners contained in other acts, insofar as this is necessary in discharging their duties under this Act and under provisions relating to foreigners contained in other acts.

Completed by immigration office
Received on:
Submitted by:
Authorisation submitted on:
Accepted by:
Date of appointment:

Application for

Reference number

<input type="checkbox"/> Issue of <input type="checkbox"/> Travel permit for foreigners <input type="checkbox"/> Travel permit for refugees <input type="checkbox"/> Travel permit for stateless persons	<input type="checkbox"/> Extension of a <input type="checkbox"/> Replacement permit <input type="checkbox"/> Emergency travel permit <input type="checkbox"/>	<input type="checkbox"/> Addition to/amendment of a
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1. Applicant

Surname, previous names if applicable	
Forename(s)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of birth	Place of birth (town, country)
Nationality	Previous nationalities
Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Civil partnership <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed since <input type="checkbox"/> Separated since.....	
Address (town, district, street, house number, main tenant if applicable)	
Height: _____ cm	Eye colour: <input type="checkbox"/> Blue <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Grey

2. Information on

<input type="checkbox"/> Spouse/civil partner	<input type="checkbox"/> Parents/legal representative (for children)
Surname, birth name if applicable	
Forename(s)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of birth	Place of birth (town, country)
Nationality	Previous nationalities
Place of residence (country, town, district, street, house number)	
<input type="checkbox"/> Residence permit	<input type="checkbox"/> Settlement permit <input type="checkbox"/> Entitlement to asylum <input type="checkbox"/> Other

3. Children

Surname	Forename(s)	M	F	Date of birth	Place of birth	Nationality	Entered in passport?
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

I confirm that all the information I have given above is complete to the best of my knowledge. I also confirm that no proceedings are currently pending against me under German criminal law or under the Regulatory Offences Act (Ordnungswidrigkeitengesetz).

My attention has been drawn to the following:

- According to § 49 of the Residence Act (AufenthG), on request I am obliged to furnish the immigration authorities with information on my identity and nationality.
According to § 95 para. 1 no. 5 of the Residence Act, anyone who fails to furnish this information or furnishes incorrect or incomplete information shall be punishable with up to one year's imprisonment or a fine.
By signing this document I certify that I have been requested by the immigration authority to furnish correct information on my identity and nationality in accordance with § 49 of the Residence Act.
I confirm that the information in the above application is complete.
- I must put forward my interests and any circumstances in my favour which are not evident or known, specifying variable circumstances, and produce forthwith the necessary evidence relating to my personal situation and any other required certificates, permits and evidence. Circumstances disclosed and evidence furnished after the expiry of the deadline set by the immigration authority may be ignored.
- In principle an administrative fee shall be charged for processing the above application; there shall be no refund if the application is withdrawn or rejected.

2 biometric photographs of the applicant

(min. 35 x 45 mm)

Place, date

Signature (for children under the age of 16: Legal Representative)

form.com

Official comments of the passport authority

The following documents have been requested/were available as proof of the applicant's identity

	Requested on	Received on		Requested on	Received on
National passport/identity card	<input type="checkbox"/>	<input type="checkbox"/>	Affirmation in lieu of an oath	<input type="checkbox"/>	<input type="checkbox"/>
Birth certificate/marriage certificate	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Federal Office notification	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Permit issued

- | | |
|---|--|
| <input type="checkbox"/> Int. travel permit as per agreement of 28.07.1951 (GC) | <input type="checkbox"/> Replacement permit |
| <input type="checkbox"/> Int. travel permit as per agreement of 28.09.1954 | <input type="checkbox"/> Emergency travel permit |
| <input type="checkbox"/> Travel permit for foreigners | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Issued | <input type="checkbox"/> Extended |
| <input type="checkbox"/> Amended | <input type="checkbox"/> Supplemented |

Period of validity until _____
 Valid for all countries, except _____

- Reason for
- | | | | |
|---|------------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> New issue | <input type="checkbox"/> Extension | <input type="checkbox"/> Amendment | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Displaced foreigner | | | |
| <input type="checkbox"/> Entitled to asylum in accordance with § 60 para. 1 Residence Act as per advice from BAMF | date: _____ | ref.: _____ | effective since _____ |
| <input type="checkbox"/> Stateless according to discharge certificate | date: _____ | ref.: _____ | effective since _____ |
| <input type="checkbox"/> Admission/entry as per §§ 22, 23 Residence Act | | | |
| <input type="checkbox"/> _____ | | | |

Fee _____ € Register no. _____

Previous permits

- The applicant has not held a German permit to date
- Old IRA/travel document/foreigner passport/replacement permit no. _____ collected and invalidated

Place, date

Authority

p.p.

Signature of responsible official

Confirmation of receipt

I have received my passport/permit today:

Place, date

Signature