

BASIC INFORMATION Surname: _____ Given Name: _____ Gender: ___ Male __ Female ____ Date of Birth: _____ Place of Birth: _____ Religion: ______ Nationality: _____ Passport No.: ______ School Attending: _____ Curriculum: ______ Permanent Address: ______ Correspondence Address(if any): _______ Telephone No.: _____ E-mail: _______ Height: _____ Cm__ Weight: ______ kg Eye colour: ______ Distinguishing Marks: _______ If you are permanent resident of Vanuatu, please fill out the following: _______ Date of Issue: ________

Signature of parent or guardian: _____

Date: