



No. \_\_\_\_\_

**የኢ.ሚግሬሽንና የዜግነት ጉዳይ ዋና መምሪያ**  
**MAIN DEPARTMENT FOR IMMIGRATION & NATIONALITY AFFAIRS**  
**የማመልከቻ ቅጽ/APPLICATION FORM**

ፓስፖርት   
PASSPORT

የይለፍ ሰነድ   
LAISSEZ-PASSER

ሀጃና ዑምራ   
PILGRIM

ቅያሬ   
REISSUE

**ያስተውሉ! /NB**

- ይህን የማመልከቻ ቅጽ መሙላት የሚችለው ኢትዮጵያዊ ብቻ ነው።  
THIS APPLICATION FORM IS TO BE FILLED BY ETHIOPIAN'S ONLY.
- ከአንድ በላይ በሆነ የኢትዮጵያ የጉዞ ሰነድ መጠቀም ከሀጃና ዑምራ ተጓጉሮ በስተቀር በጥብቅ የተከለከለ ነው።  
TO USE MORE THAN ONE TRAVEL DOCUMENT IS STRICTLY PROHIBITED EXCEPT PILGRIM.
- የይለፍ ሰነድ ፓስፖርት ለሌላውና ከውጭ ወደ አገሩ ለሚመለስ ኢትዮጵያዊ ይሰጣል።  
LAISSEZ-PASSER SHALL BE ISSUED TO AN ETHIOPIAN WHO IS NOT HOLDING A PASSPORT AND IS RETURNING FROM ABROAD

**I. የአመልካች/APPLICANTS**

ስም: \_\_\_\_\_  
NAME: \_\_\_\_\_

የአባት ስም: \_\_\_\_\_  
FATHER'S NAME: \_\_\_\_\_

የአያት ስም: \_\_\_\_\_  
G.FATHER'S NAME: \_\_\_\_\_

ጾታ/SEX: ወንድ/MALE  የትውልድ ዘመን: ቀን \_\_\_\_\_ /ወር \_\_\_\_\_ /ዓ.ም. \_\_\_\_\_ የትውልድ ቦታ \_\_\_\_\_  
ሴት/FEMALE  DATE OF BIRTH: DD \_\_\_\_\_ /MM \_\_\_\_\_ /YYYY \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

ቁመት \_\_\_\_\_ የዓይን ቀለም \_\_\_\_\_ የፀጉር ቀለም \_\_\_\_\_ ሥራ \_\_\_\_\_  
HEIGHT \_\_\_\_\_ COLOUR OF EYES \_\_\_\_\_ COLOUR OF HAIR \_\_\_\_\_ OCCUPATION \_\_\_\_\_

ቁመት \_\_\_\_\_ የዓይን ቀለም \_\_\_\_\_ የፀጉር ቀለም \_\_\_\_\_ ሥራ \_\_\_\_\_  
HEIGHT \_\_\_\_\_ COLOUR OF EYES \_\_\_\_\_ COLOUR OF HAIR \_\_\_\_\_ OCCUPATION \_\_\_\_\_

**II. የጋብቻ ሁኔታ/MARITAL STATUS**

ያላገባ/ች  ያገባ/ች  ሌላ ካለ: \_\_\_\_\_  
SINGLE MARRIED IF OTHER, SPECIFY: \_\_\_\_\_

SINGLE MARRIED IF OTHER, SPECIFY: \_\_\_\_\_

**III. የመኖሪያ አድራሻ/RESIDENCE ADDRESS**

አገር ውስጥ/LOCAL

ውጭ አገር/ABROAD

ክልል/REGION \_\_\_\_\_

አገር/COUNTRY \_\_\_\_\_

ዞን/ZONE \_\_\_\_\_

ከተማ/CITY \_\_\_\_\_

ወረዳ/ክፍለ ከተማ/WOREDA/K.KETEMA \_\_\_\_\_

የጎዳናው ስም /STREET NAME \_\_\_\_\_

ቀበሌ/KEBELE \_\_\_\_\_

ስልክ ቁጥር/PHONE No. \_\_\_\_\_

የቤት ቁጥር/HOUSE No. \_\_\_\_\_

ፖስታ ሳጥን ቁጥር/P.O.BOX \_\_\_\_\_

ስልክ ቁጥር/PHONE No. \_\_\_\_\_

ኢ-ሜይል/E-MAIL \_\_\_\_\_

**IV. ማመልከቻ ያቀረበው/APPLICATION PRESENTED BY**

አመልካች   
APPLICANT

ወላጅ   
PARENT

ተወካይ   
PROXY

ሞግዚት   
GUARDIAN

ከዚህ በላይ በዝርዝር ያሰፈርኳቸው ሁሉ የተሟሉ፣ ፊት-ከ-ኋራ እና ትክክለኛ ቃል መሆናቸውን አረጋግጣለሁ።  
I, THE UNDERSIGNED DECLARE THAT THE ABOVE STATEMENTS ARE COMPLETE, TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

ሙሉ ስም/FULL NAME \_\_\_\_\_ ፊርማ/SIGNATURE \_\_\_\_\_ ቀን/DATE \_\_\_\_\_