

Form 1

Protocol Department, Ministry of Foreign Affairs, Copenhagen				For Protocol Department only	
Registration of Members of Diplomatic Missions resident in Denmark				CPR nr.:	
Copy of passport(s) and 2 identical new passport size photos to be forwarded				Opholdskort nr.:	
				ID kort nr.:	
				Periode:	
1. Name of Mission					
2. Last Name(s) – as in passport					
3. First Name(s) – as in passport					
4. Date of birth	Date:	Month:	Year:	Place of Birth (City and country)	
5. Nationality				Danish CPR No. / Secondary Nationality – if any	
6. Passport (Diplomatic, Official, Service, Ordinary)	Passport type		Date of issue		
7. Civil status (Single, Married, Divorced etc)				Date and place of change in civil status (eg. date of divorce)	
8. Arrival and duty in Denmark	Date of arrival			Date of taking up duty	
9. Private address in Denmark				Telephone no.	
10. Previously residing in Denmark	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when?				
11. Category (cf. Vienna Convention art. 1)	Head of Mission <input type="checkbox"/> Diplomatic Staff <input type="checkbox"/> Administrative and Technical Staff <input type="checkbox"/> Service staff <input type="checkbox"/> Service staff (maintenance) <input type="checkbox"/>				
12. Position in the Diplomatic List	After (name/title):			Not to be listed: <input type="checkbox"/>	
13. Diplomatic title/function (Attaché, Counsellor etc)					
14. Name and category of predecessor					
15. MOMS/VAT reimbursement	Eligible for MOMS/VAT reimbursement Yes <input type="checkbox"/> No <input type="checkbox"/>			Email address for PRO-Moms user account	
16. Accompanied to Denmark by the following family members (if necessary, please use the back). All accompanying family members must fill in their own form					
Name	Relationship	Nationality	Date of birth		
17. Mission's contact person	Name:	Telephone:	E-mail:		

Application for Residence Card or ID Card

18. Two specimen signatures in black ink of the applicant within the spaces provided			
The Protocol Department must be informed by Note Verbale of any changes in the above information and of the termination of duty and final departure of any member of the Mission. On final departure the ID/residence card must be returned to the Protocol Department.			
Date:	Stamp of Mission:		Photo of applicant One photo affixed. One photo enclosed. Requirements for photo: Full frontal. Colour and of high quality. Measurements min. 32x40 mm, max. 35x45 mm, from eye to tip of chin 13 mm, must show forehead and hair line.
Signature of the Head of Mission:			