

**KINDISTEE SPOOKSOLIY
KINGDOM OF SPOCANIA**

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2	Surname	3	Given names	
4	Date of birth	5	Place of birth	
6	Country of birth	7	Sex	8 Marital Status
9	Citizen of country	10	Passport No.	Valid until
11	If applicable, Country of Issue or Travel Document	12	Family Status	
13	Accompanying Family Members			
	Name		Date of Birth	Relationship
Have you other dependants other than those listed above? YES/NO				
14	Full Name, Address and Relationship of Person willing to assist			
15	Intended Occupation			16 Mother tongue

I certify that the above statements are true and correct.

Signature

Date

17	Imm.Cat.	18	Educ.Qual.	19	Years of Schooling
20	Employment Code	21	Spocanian language ability	22	Medical File No.
23	Date Issued	24	Office of Issue	25	Code
26	Original Entry in Spocania	27	Signature of Immigration Officer	28	Remarks

See back of this paper for Warning and Privacy Statement. This form has been established by the Minister of Citizenship and Immigration. This document is the property of the Government of Spocania.

Remarks

Warning

Photocopies of this document are not valid for travel to Spocania. Use of this document by persons other than the holder may result in criminal prosecution under the Immigration Act.

Privacy Statement

The information provided on this form is collected under the authority of the Immigration Act for the purpose of granting you landing in Spocania. This information will be stored in Personal Information Banks, code IDafiy 55, and you have the right of access to it and to its protection under the Privacy Act.