

SERIAL NO.

APPLICATION FOR PRESS ACCREDITATION

(FOREIGN CORRESPONDENTS)

FILL IN BLOCK LETTERS

1. SURNAME:
2. FULL NAME:
3. OTHER NAMES (IF ANY)
4. AGE: (b) DATE OF BIRTH:
5. PLACE OF BIRTH:
6. NATIONALITY:
7. PREVIOUS NATIONALITY (IF ANY):
8. PASSPORT NO.:
9. EXPIRY DATE.:
10. ADDRESS IN GHANA:
.....
11. PERMANENT ADDRESS:
.....
12. PURPOSE OF VISIT:
13. DURATION OF STAY: (a) No. Of Days:
(b) From To:
14. MODE OF TRAVEL TO GHANA:
15. MODE OF TRAVEL FROM GHANA:
16. ENTRY POINT INTO GHANA:
17. EXIT POINT FROM GHANA:
18. DESTINATION ADDRESS:
19. DETAILS OF PRESS CARDS: (a) ORGANISATION:
(b) DATE OF ISSUE:
(c) CARD NUMBER:

.....2 NB: (TO BE ACCOMPANIED BY THREE PASSPORT SIZE PHOTOGRAPHS)

1. PRESENT EMPLOYERS/ORGANISATION:
.....
2. PREVIOUS EMPLOYERS/ORGANISATION:
.....
3. HAVE YOU EVER VISITED GHANA (IF SO, GIVE DETAILS OR DATES, PLACES VISITED,
INTERVIEWS).
.....
4. RESIDENTIAL ADDRESS OF PREVIOUS VISITS:
.....
5. COUNTRIES VISITED IN AFRICA:
.....
6. OTHER COUNTRIES VISITED:
.....
7. IN WHICH PUBLIC ATIONS/PROGRAMMES HAVE YOUR ARTICLES/PICTURES ETC. BEEN
PUBLISHED?:.....
.....
8. IN WHICH PUBLICATION/PROGRAMMES WILL YOUR WORK IN GHANA APPEAR?:
.....
.....
9. HAVE YOU HAD ANY PROBLEMS WITH AUTHORITIES IN ANY COUNTRY YOU HAVE VISITED?:
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10. LIST YOUR EQUIPMENT AND THEIR SERIAL NOS. FOR IDENTIFICATION IN CASE OF LOSS/
MISPLACEMENT):

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11. DATE OF APPLICATION

.....

12. SIGNATURE OF APPLICANT

.....

13. NAME OF RECEIVING OFFICER

.....

14. SIGNATURE OF RECEIVING
OFFICER

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