

DEPARTMENT OF IMMIGRATION

DOI-OOP

CLEARANCE / SEARCH FORM

Date: ___ / ___ /20___

The Director Fiji Immigration Department <u>SUVA</u>

IMMIGRATION CLEARANCE FORM

(\checkmark Tick where applicable)

I/We would like to request for:

□ Personal/Travel History.

 \Box Passport Details.

Travel Ban Inquiries.Other Search Inquiries.

SEARCH DETAILS

Name:	
Date of Birth:	
Passport No:	
Residential Address:	Postal Address:
Phone Contact:	Email Address:

(Declaration)

I/We solemnly declare(s) that the information requested would be solely used for the purpose applied for or as stated on my/our attached letter. I/We also understand that using this information for any other purpose is a serious offence under Section 64 (1) (a), Part 9 of the Immigration Act 2003.

Signature:	
Γ	
Organization Stamp:	
(Official Use Only)	
	Organization Stamp:

Vetting Officer:	Cashier:
Date:	Amount Paid:
Approved for Payment: YES NO	Receipt Number:
	Date: