	ESTIMATED BURDEN: 25 MINUTES *												
U.S. DEPARTMENT OF STATE	FOR OFFICIAL USE ONLY												
NOTIFICATION OF APPOINTMENT	P R												
OF FOREIGN DIPLOMATIC OFFICER													
AND CAREER CONSULAR OFFICER	A												
TO: Secretary of State, Attention - Office of Protocol	PID Recognition Date (mm-dd-yyyy)												
1. FROM (Name of Embassy/Mission)	2. TYPE OF OFFICER DIPLOMATIC CONSULAR												
	EMBASSY MISSION TO INTERNATIONAL												
	WORLD BANK INTERNATIONAL MONETARY FUND												
CONTACT NAME AND TELEPHONE NO.	OTHER												
3. FULL NAME													
(a) SURNAME (Last)	(b) GIVEN (First) (c) MIDDLE												
(d) PREFIX OR RANK (e) SUFFIX (f) MAIDEN	(g) OTHER												
	MALE FEMALE												
Is the correct sequence for printing name a, b, c, e?													
Is the correct sequence for printing name a, b, c, e? ABBREVIATED YES ABBREVIATED	NO. If No, give correct sequence:												
NAME:													
Please indicate how name should appear on documents (identification cards, et	c.) Surname first.												
4. CURRENT CITIZENSHIP	5. DATE OF BIRTH (mm-dd-yyyy)												
6. CITIZENSHIP AT BIRTH	7. PLACE OF BIRTH (City, Country)												
8. TYPE OF PASSPORT	9. TYPE OF VISA												
DIPLOMATIC OFFICIAL REGULAR OTHER	A1 A2 OTHER												
Dispositive Correcte Redouble Office	G1 G2 G3 G4 (Specify type)												
	TITLE AND VISA PAGES FROM PASSPORT. STAPLE TO FORM.												
10. LAST ARRIVAL IN U.S.A. (mm-dd-yyyy)	11. RESIDENCE ADDRESS TEMPORARY PERMANENT												
DATE:	NUMBER STREET (AVE., BLVD, PLACE, ETC.) APT.												
PORT OF ENTRY MANNER OF ENTRY													
	CITY STATE ZIP												
	TELEPHONE												
12. EMPLOYING OFFICE	13. DUTY OFFICE (If different from employing office)												
NAME OF OFFICE	NAME OF OFFICE												
AUMOPPA OTRETT (AUG. DAVID DAVID DE COLOR DE COL	NUMBER CTREET (AVE DI VID DI (CE CTG)												
NUMBER STREET (AVE., BLVD, PLACE, ETC.) SUITE	NUMBER STREET (AVE., BLVD, PLACE, ETC.) SUITE												
CITY STATE ZIP	CITY STATE ZIP												
TELEPHONE EXT.	TELEPHONE EXT.												
14. JOB TITLE	15. DATE OF ENTRY ON DUTY (mm-dd-yyyy)												
Head of post? YES NO													
16. EXPECTED DATE OF DEPARTURE (mm-yyyy)	17. NAME, TITLE AND PID (IF AVAILABLE) OF PREDECESSOR												
	AND DATE (mm-yyyy) OF TERMINATION												
18. WILL OFFICER SERVE IN ANOTHER OFFICIAL CAPACITY?	19. ARE ANY IMMEDIATE FAMILY MEMBERS EMPLOYED BY A												
YES NO If YES, give position and duty office:	FOREIGN GOVERNMENT IN THE UNITED STATES? YES NO												
	EACH PERSON MUST SUBMIT A SEPARATE NOTIFICATION OF												
	EACH PERSON MUST SUBMIT A SEPARATE NOTIFICATION OF APPOINTMENT.												

20. ALL PREVIOU (List To/From (US ASSIGNMENTS mm-yyyy))	S WITH	IIN THE	UNI	ΓED ST	ATES (If not	listed in	n iten	n 21	below.	includ	ing st	tudy a	nd	traini	ing)			Vanil Vanil In Sin		etti./	111
21. ALL ASSIGNI beginning with	MENTS/POSITION h most recent) (List	S/ACA To/Frod	DEMIC m (mm-y)	STUI vyy))	DIES/OT	THER A	CTIV	TITIES V	WITI	HIN	PAST	FIVE Y	/EAR	RS (Do	ates	s, nati	ure	of ac	tivity.	and lo	cation		
22. FAMILY MEN	ABERS Residing in	househ	old in th	e Uni	ted State	es (Use	DS-20	007 cont	tinua	ation	sheet i	fneces	sarv:	Stan	le to	o this	for	m)		Taring Control		ydiy.	
(a) SURNAM				(b) GIVEN (First)						(c) (Middle													
(d) PREFIX	(e) SUFFIX	(f) M	AIDEN				(g) C	(g) OTHER (I				(h) RELATIONSHIP] N	MALE FEMALE					
Is the correct so	equence for printing	name :	a. b. c. e ^c	?		☐ YI	es [NO.		If No	o, give	correct	sequ	ence:		_				1 1			
NAME: Please indicate	how name should a	appear o	on docum	nents	(identifi	cation c	ards.	etc.) La	ast na	ame	first.	100/10										Ш	
DATE OF BIRTH (mm/dd/yyyy) PLACE OF BIRTH (City. Country)									CITIZENSHIP									A ST.	STATUS (Attach copies)				
23. PLEASE INDI	CATE IF REQUES NO.	TING I	DENTIF	ICAT	ION CA	ARDS F	OR D	EPEND	ENT	Γ:													mi
Attach envelop photographs of Ambassador		al. 5 for Intentional provision of false information on this form violates United States law (Title 18 U.S. Code. Section 1001) and will be considered a violation of the international legal obligation of foreign missions and their personnel to respe												esnec									
Attach 3 photog spouses of diplo spouse of Ambi	omats. 4 for		ANY CHANGES IN THIS INFORMATION MUST BE REPORTED IMMEDIATELY TO THE OFFICE OF PROTOCOL (USE FORM DS-2006, NOTIFICATION OF CHANGE)																				
Attach 2 pl depende identi		SIGNA							DATE (mm-dd-yyyy)					(Embassy Seal)									
Print nam back		TYPED NAME & SIGNATURE OF CHIEF OF MISSION OR AUTHORIZED DEPUTY DATE (mm-dd-yyyy)																					
the Privacy Act.	of 1974, as amende d aliens lawfully add	d, 5 U.: mitted f	or perma	a, con	ntains pr residenc	ovision e in the	s rega Unite	rding th	e ma	ainte	nance	collect	ion 1	ise ai	nd a	disser ded in	nin ac	ation corda	of inf	ormati ith sub	on abo	ut Uni	ited) of

AUTHORITIES: Vienna Convention on Diplomatic Relations of 1961; Vienna Convention on Consular Relations of 1963; Diplomatic Relations Act (22 U.S.C. 254a-e); International Organizations Immunities Act (22 U.S.C. 288e(a)).

PURPOSE: The principal purpose for the collection of this information is to implement various provisions of the above-cited authorities which are predicated upon acceptance by the Department of State.

ROUTINE USES: The principal users of this information are offices within the Department of State. including but not limited to, the Office of Protocol, the Office of Foreign Missions, and the Office of Visa Services. In response to inquiries from law enforcement agencies, the Office of Protocol may confirm status as recognized by the Department of State. Information may also be provided to other government agencies having statutory or other lawful authority to maintain such information. Certain information specifically related to the operation and activities of the Executive Council on Foreign Diplomacy or The Hospitality and Information Service (THIS) may be provided to those organizations. Names of the members of the diplomatic staff, office addresses, titles, and names of spouses are published quarterly in the Diplomatic List. Department of State Publication 10424. Names of Consular Officers, titles, and office addresses are published semiannually in Foreign Consular Offices in the United States. Department of State Publication 10277

Submission of these forms is mandatory. Failure to provide any of the requested information may prevent acceptance and the extension of benefits to principals

or family members as provided in the above-cited authorities.

*Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. In accordance with 5 CFR 1320.5(b), persons are not required to respond to the collection of this information unless this form displays a currently valid OMB control number. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: Department of State (A/RPS/DIR) Washington, D.C. 20520-1849, and to the Office of Information and Regulatory Affairs, Office of Management and Budget. Paperwork Reduction Project (1405-0090). Washington, D.C. 20503

INSTRUCTIONS FOR COMPLETING FORM DS-2003. NOTIFICATION OF APPOINTMENT OF FOREIGN DIPLOMATIC OR CONSULAR OFFICER

Please Read All Instructions Before Completing This Form.

This form is to be completed for all diplomatic and career consular officers of all foreign missions. All questions should be answered completely and accurately. If a question does not apply, please type N/A.

Any changes in the information provided on this form should be reported to the Office of Protocol as soon as possible using the Notification of Change, Form DS-2006.

NOTE: It is important that all information provided to the Office of Protocol and the Office of Foreign Missions be consistent. Discrepancies, such as in the spelling of the name, the residence address, date of birth, etc., may delay processing applications for

identification cards, tax exemption cards, drivers licenses, and automobile registrations. The instructions below are numbered to correspond to the numbered items on the form. PLEASE TYPE ALL ANSWERS. 1 Enter the name of the Embassy or Mission submitting 9 Enter "X" in box idicating type of United States visa held in the form. Give telephone number of office which can be passport. Make a photocopy of the front (and back if annotated) of the contacted for further information, if necessary. Entry/Departure Form I-94, and the title and visa pages (showing name and date of birth) from the officer's passport and staple them to the back 2 Enter an "X" in the box to indicate if the officer is a of the form. NOTE: If a Machine Readable Visa (MRV) has been DIPLOMATIC or CONSULAR officer. Enter and "X" to issued, it is not necessary to submit title pages from the passport. (An indicate the type of office or mission to which the officer is MRV contains the visa holder's photo.) assigned. 10 Enter date (mm-dd-yyyy), of arrival in the United States, port of 3 Enter the officer's full name in the order specified: (a) entry, and manner, e.g., plane, car, etc. surname or family name; (b) first name or given name; (c) middle name; (d) prefix such as Mr., Mrs., Ms., or Miss, 11 Enter residence address (not duty address unless actually living and military rank, or title; (e) suffix, such as Jr. or Sr.; (f) maiden working at the same location), in the United States where officer currently name, and (g) any other name used. Type "X" to indicate if resides. If temporary (hotel, etc.), use Form DS-2006 to notify the Office male or female. of Protocol when officer moves to a permanent address. NOTE: Names on identification cards will be printed: 12 Enter the name, address, and telephone number of foreign embassy, last, first, middle, in the order of a, b, c, e, on No. 3 of the mission or post where the officer will be assigned. form. If this is not the correct sequence for the officer's name, indicate correct sequence in the spave provided. 13 Enter the name, address, and telephone number of the actual office (Example: f, b, g, e). Due to space limitations it may not be or annex where the officer will be working, if different from No. 12. possible to include all names on identification cards. In the NOTE: All addresses must be street addresses, including block spaces after "Abbreviated Name" type the officer's type, e.g. Street, Ave., Blvd., etc., not post office box name as it should appear on identifiction card, using no more numbers, and must include ZIP codes and telephone area than 34 spaces, and allowing spaces for commas and periods. codes. 14 Enter title of position, e.g. Minister (Political), Attache NOTE: The abbreviated name, if used, will appear in all (Agriculture), Third Secretary (Commercial), Consul General, etc. Enter publications and documents issued by the U.S. Department "X" in box if officer is the head of a post or mission. of State. 15 Enter the date (mm-dd-yyyy) officer assumed present official duties Enter present nationality. in the United States. Enter officer's date of birth (mm-dd-yyyy). 16 Enter the date (mm-yyyy), (approximate) that officer will terminate Enter nationality at birth, even if the same as No. 4. duties in the United States. Enter officer's place of birth - city and country or state. 17 Enter name, title and Personal Identification Number (PID), if available, of the person the officer is replacing. Enter date (mm-yyyy), of Enter "X" in box indicating type of passport. termination of predecessor. If new position, so state.

18 If officer will serve in any official capacity other than that listed, such as a dual accreditation (e.g. diplomatic and consular titles, diplomat at Embassy and O.A.S. or U.N.), enter position title and mission. NOTE: Separate notification will be required.

If an immediate family member (spouse or dependent) is or will be employed in the United States by a foreign government or international organization, please identify and indicate position or title, relationship and where the person is working. The person must be notified separately to the Office of Protocol using the appropriate form.

20 If not listed in item 21, enter dates (mm-yyyy), nature and place (city and state) of all previous assignments (including study and training) in the United States. List To/From Month/Year (mm-yyyy).

21 Enter the dates (mm-yyyy), nature of employment (job title and employer), and place (city and country) of academic study or other activities for previous 5 years, starting from the most recent assignment prior to this one. List to/From--Month/Year (mm-yyyy). (NOTE: For Nos, 20, 21, attach additional sheet, if necessary.)

Enter names of all family members residing in the household in the United States, following the same format as in NO. 3 above. Use Form DS-2007 for additional names. Give date of birth (mm-dd-yyyy), place of birth, (city country), current citizenship, and relationship to principle employee. Enter type of United States visa (A-1, B-2, etc.) currently held,

and attach photocopies of front (and back if annotated) of Form I-94 and the title and visa pages from each dependent's passport. NOTE: If a Machine Readable Visa (MRV) has been issued, it is not necessary to submit title pages from the passport. (An MRV contains the visa holder's photo.)

23 Enter "X" in appropriate boxes for an identification card. Persons who should receive identification cards include: For diplomats (a) principals. (b) spouses (except U.S. citizens), (c) dependents (except U.S. citizens) who are unmarried children between 16 and 21 years who reside with their parents or are full-time students, or unmarried children under 23 years who are full-time students (for students between 21 and 23 attach family status justification form); for consular officers only the consular officer, unless the sending state and the U.S. have a bilateral agreement extending immunity to family members.

An envelope with four photographs (2" x 2") of the officer (five for Ambassador) should be affixed to the form. NOTE: Two additional color photographs of the spouse (three photographs for spouses of diplomats, four for spouse of Ambassador), and each dependent child over age 16 must be included for those eligible for an identification card. Photographs should have been taken within the past 12 months. Print full name and foreign mission on the back of each photo.

The officer must sign and date (mm-dd-yyyy), the form. The form must be signed and dated (mm-dd-yyyy), by the designated approving embassy official, and the official embassy seal must be affixed.

Submit forms (original and two copies) and attachments to

Office of Protocol
U.S. Department of State
Production Unit, State Annex 33
3507 International Place, NW
Washington, DC 20008-3034

ANY CHANGES IN THIS INFORMATION SHOULD BE REPORTED TO THE OFFICE OF PROTOCOL USING NOTIFICATION OF CHANGE, FORM DS-2006