NOTIFICATION OF APPOINTMENT OF FOREIGN GOVERNMENT EMPLOYEE	FOR OFFICIAL USE ONLY    P											
TO: Secretary of State, Attention - Office of Protocol	PID											
1. FROM (Name of Embassy/Mission)  CONTACT NAME AND TELEPHONE NO.	2. TYPE OF OFFICER  EMBASSY MISSION TO INTERNATIONAL ORGANIZATION  CONSULAR PRIVATE DOMESTIC EMB. MISC.  MISCELLANEOUS CON. MISSION TO INTL. ORG.											
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?	NO. If No, give correct sequence:											
ABBREVIATED NAME:												
Please indicate how name should appear on documents (identification cards, etc.) Surname firs	st.											
4. CURRENT CITIZENSHIP	5. DATE OF BIRTH (mm-dd-yyyy)											
6. CITIZENSHIP AT BIRTH	7. PLACE OF BIRTH (City, Country)											
8. TYPE OF PASSPORT  DIPLOMATIC  OFFICIAL  REGULAR  OTHER	9. TYPE OF VISA    A1											
ATTACH COPIES OF ENTRY/DEPARTURE FORM 1-94, AND T	ITLE AND VISA PAGES FROM PASSPORT. STAPLE TO FORM.											
10. LAST ARRIVAL IN U.S.A. <i>(mm-dd-yyyy)</i> DATE:	11. RESIDENCE ADDRESS TEMPORARY PERMANENT											
PORT OF ENTRY MANNER OF ENTRY	NUMBER STREET (AVE., BLVD, PLACE, ETC.) APT.  CITY STATE ZIP											
	TELEPHONE											
(FOR DOMESTIC EMPLOYEES: See instructions for item #12.)	(FOR DOMESTIC EMPLOYEES: See instructions for item #13.)											
12. EMPLOYING OFFICE  NAME OF OFFICE	13. DUTY OFFICE (If different from employing office)											
	NAME OF OFFICE											
NUMBER STREET (AVE., BLVD, PLACE, ETC.) SUITE	NUMBER STREET (AVE., BLVD, PLACE, ETC.) SUITE											
CITY STATE ZIP	CITY STATE ZIP											
TELEPHONE EXT.  14. JOB TITLE	TELEPHONE EXT.											
	15. DATE OF ENTRY ON DUTY (mm-dd-yyyy)											
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?  YES NO If YES, give position and duty office:	19. ARE ANY IMMEDIATE FAMILY MEMBERS EMPLOYED BY A FOREIGN GOVERNMENT IN THE UNITED STATES?  If YES, give names and duty office:  YES NO											
	EACH PERSON MUST SUBMIT A SEPARATE NOTIFICATION OF APPOINTMENT.											

20. ALL PREVIOUS FORE (List To/From (mm-y)	IGN ASSIGNMENT	'S WITHIN THE (	JNITED ST	'ATES (If no	t listed	d in ite	:m 21 b	elow, in	ıcluding	study	and tr	aining)					_			
21. ALL ASSIGNMENTS/I	POSITIONS/ACAD	EMIC STUDIES/(	OTHER AC	TIVITIES WI	THIN	PAST	FIVE YE	 EARS (Di	ates, nai	ure of a	activity,	and loc	ation -							
beginning with m	<i>nost recent)</i> (List To/Fi	:0m ( <i>mm-yyyy)</i> )	)																	
•																				
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ı																				
22. FAMILY MEMBERS R	lesiding in househo	Id in the United S	States /Use		ontinu	uation s	sheet if	necessi	ary; St	aple to	this fo	orm)								
(a) SURNAME (Last								) GIVEN	_	<u></u>				{c	(c) MIDDLE					
(d) PREFIX	(e) SUFFIX	(f) MAIDEN					- (g	) OTHER	 R		(h)	(h) RELATIONSHIP					<del>-</del>			
									<u>'</u>		10.0					MALE	_[	FEMA	ALE	
Is the correct sequen	ice for printing nam	ne a, b, c, e?		Г	] YE	ES [	<u></u> и	0.	lf No,	give c	orrect	sequen	ce:	_						
ABBREVIATED NAME:																				
Please indicate how n					.c.) Su	urname	a first.		= <del>_</del>							_				
DATE OF BIRTH (mm/dd/)	<i>үүүү)</i>	PLACE OF BIR	TH (City, C	Country)				CITIZENSHIP						VISA STATUS (Attach copies)						
23. PLEASE INDICATE IF	REQUESTING IDE	VTIFICATION CA	ARDS						][		<del>-</del>									
FOR EMPLOYEE:	YES	NO.	<del></del>	FOR	DEPE	ENDENT	TS:		□ Y	/ES		NO.	<u> </u>							
Attach 4 recent of principal {2 pl miscellaneous e	hotographs if employee or			at present engag ttorney General in alse information o nnel to respect th																
• •	2" x 2" SIGNATURE OF APPLICANT							DATE (n								T			_	
Attach 2 photographs for each dependent eligible for an					Domestic	ic Employ	rees)					DATE (mm-dd-yyyy)				(Embassy Seal)				
identification card.  Print name and mission on back of each photo  TYPED NAME & SIGNATURE OF CHIEF OF MISSION O						N OR AU	R AUTHORIZED DEPUTY					DATE (mm-dd-yyyy)				(Lilibassy Seal)				
			DDIVA		104	- PERU	-100V I			~= <b>^</b> =							:			
The Privacy Act of 1974, a residence in the United State AUTHORITIES: Vienna Con 288e(a)). PURPOSE: The principal pur ROUTINE USES: The principal pur other lawful authority to me be provided to those organical provided to thos	tes. The following info nvention on Diplomati urpose for the collection cipal users of this info aw enforcement agent laintain such informati	ormation is provided tic Relations of 190 on of this information ormation are office icies, the Office of F tion. Certain inform	rovisions regard in accordar 261; Vienna ( 261; Vienna ( 26) viinni the 27) viinni the 27) viinni the 28) viinni v	ince with subs Convention or lement various e U.S. Departn y confirm stati fically related	aintenan section ( n Consu s provisi ment of tus as re to the	ance, coll (e)(3) of sular Rel isions of of State, recognize operation	ollection, of the Privelentions of the above, including tion and a	use, and ivacy Act of 1963; ve-cited a ng but no ne U.S. De activities	d dissemi t. Diploma authorition of limited epartmen	ination of the second of the second of State of	of informations A chare properties Office rate. Info	mation a Act (22 edicated of Prote ormation cil on Fo	U.S.C. 254 d upon acce ocol, the Of n may also b preign Dinlo	la-e); Int eptance l ffice of f be provid	ternation by the U Foreign I led to ot	nal Organization  I.S. Department  Missions, and the government  Spitality and I	ons Imm nt of Sta the Offi nt agenc	unities Act ite. ice of Visa ics having	Services. In statutory or	
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## INSTRUCTIONS FOR COMPLETING FORM DS-2004, NOTIFICATION OF APPOINTMENT OF FOREIGN GOVERNMENT EMPLOYEE

Please Read All Instructions Before Completing This Form.

This form is to be completed for all employees of foreign missions except diplomatic and consular officers. 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 immediately using the Notification of Change, Form DS-2006.

In the case of members of the administrative and technical and service staffs of embassies and consular employees and members of the service staff of consular posts, the United States does not extend privileges and immunities to persons unless documentation is provided to indicate that the sending state: (1) pays the cost of the employee's transportation to the U.S. from the employee's normal place of residence; (2) transfers the employee and his or her immediate family out of the United States within a specific time frame consistent with the sending state's transfer policy; and (3) pays the cost of the employee's transportation from the United States to the employee's normal place of residence or to the country of the employee's next assignment.

**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. If employee is a U.S. citizen, the following items do not need to be completed; 8, 9, 10, 16, 17, 18, 20, 21, 22, (unless family member also is employed by a foreign government or international organization), or 23.

If employee is a permanent resident alien (green card holder), the following items do not need to be completed; 8, 10, 16, 17, 18, 20, 21, 22, (unless family member also is employed by a foreign government or international organization), or 23.

the form. Give telephone number of office which can be contacted for further information, if necessary.

2 Enter "X" in the box to indicate if the employee works at an embassy, consulate, miscellaneous foreign government office, or mission to an international organization, or is a personal or domestic employee of a foreign government official. For personal or domestic employee, check box corresponding to employer's status (e.g. Embassy, Consular).

1 Enter the name of the Embassy or Mission submitting

3 Enter the officer's full name in the order specified: (a) surname or family name; (b) first name or given name; (c) middle name; (d) prefix such as Mr., Mrs., Ms., or Miss, military rank, or title; (e) suffix, such as Jr. or Sr.; (f) maiden name, and (g) any other name used. Type "X" to indicate if male or female.

NOTE: Names on identification cards will be printed: last, first, middle, in the order of a, b, c, e, on No. 3 of the form. If this is not the correct sequence for the officer's name, indicate correct sequence in the space provided. (Example: f, b, g, e). Due to space limitations it may not be possible to include all names on identification cards. In the block spaces after "Abbreviated Name" type the officer's name as it should appear on identification card, using no more than 34 spaces, and allowing spaces for commas and periods.

**NOTE:** The abbreviated name, if used, will appear in all publications and documents issued by the U.S. Department of State.

- 4 Enter present nationality.
- 5 Enter employee's date of birth (mm-dd-yyyy).
- 6 Enter nationality at birth, even if the same as No. 4.
- 7 Enter employee's place of birth city and country or
- 8 Enter"X" in box indicating type of passport, if any.\*
- 9 Enter "X" in box indicating type of United States visa held in passport, or if permanent resident, give alien registration "A" number. Make a photocopy of the front (and back if annotated) of the Entry/Departure Form I-94, and the title and visa pages (showing name and date ((mm-dd-yyyy)), of birth) from the employee's passport (alien registration card for permanent resident aliens) and staple it to the back of the first copy of the form. **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.) Does not apply to United States citizens.
- Enter date (mm-dd-yyyy), of arrival in the United State, port of entry, and manner, e.g., plane, car, etc. \*
- Enter residence address (not duty address unless actually living and working at the same location), in the United States where employee currently resides. If temporary (hotel, etc.), use Form DS-2006 to notify the Office of Protocol when employee moves to a permanent address.

12 Enter the name, address, and telephone number of foreign mission consulate, or office where the employee will be assigned. **NOTE:** For domestic employees, give the name, Personal Identification Number (PID), and title of the employer, and his/her complete office address.

13 Enter the name, address, and telephone number of the actual office or annex where the employee will be working, if different from No. 12. **NOTE:** For domestic employees, give the residence address where domestic duties will be performed.

**NOTE:** All addresses must be street addresses, including type, e.g. Street, Ave., Blvd., etc., not post office box numbers, and must include ZIP codes and telephone area codes.

14 Enter person's title or position, e.g. secretary, clerk, driver, cook, etc. Do not use any diplomatic or consular title reserved for officer.

15 Enter the date (mm-dd-yyyy), employee assumed present official duties in the United States.

Enter the date (mm-yyyy), (approximate) that employee will terminate duties in the United States.\*

17 Enter name, title and (PID), if available, of the person the employee is replacing. Enter date (mm-yyyy), of termination of predecessor. If new position, so state. (Not applicable for domestics.)\*

18 If employee will serve in any official capacity other than that listed in No. 14, enter position title and mission. Separate notification will be required.\*

19 If a 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 of all previous assignments (including study and training) and place (city and state) 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.)\*

22 Enter names of all eligible 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 Form I-94 or copy of Permanent Resident Alien card, 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. For embassy A&T staff (a) principals (who are not U.S. citizens, permanent resident aliens or determined to be "permanently resident in the U.S.), (b) spouses (except U.S. citizens, spouses of persons determined to be "permanently resident in" the U.S., and permanent resident aliens), (c) dependents of persons determined to be "permanent resident aliens and dependents of person determined to be "permanent resident in" the U.S.) 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 A&T staff and embassy service staff, principals (who are not U.S. citizens, permanent resident aliens or determined to be "permanently resident in" the U.S.), unless the sending state and the U.S. have entered into a bilateral agreement extending immunity to family members. Other employees and family members do not receive identification cards.\*

An envelope with two photographs (2" x 2") of the employee should be affixed to the form. **NOTE:** Two additional color photographs of the employee, spouse, 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 employee must sign and date (mm-dd-yyyy), the form. In case of domestic employees, the official employers must also sign and date 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.

\*Not required if person being registered is U.S. Citizen or Permanent Resident Alien

Submit forms (Original and one copy) and attachments to Office of Protocol
U.S. Department of State
Production Unit, State Annex 33
3507 International Place, NW
Washington, DC 20008-3034