

Data items collected by the eGov NOC request but not collected by the DS-2006 & DS-2007 * Forms;

- * Form DS-2007: NOTIFICATION OF DEPENDENTS OF DIPLOMATIC, CONSULAR AND FOREIGN GOVERNMENT EMPLOYEES (CONTINUATION SHEET)

[HOME](#) » [PERSON MANAGEMENT](#) » NOTIFICATION OF CHANGE

Principal/Subject Information | Page 1 of 3 | [Instructions](#)

*Change Request Types:

Principal's Information

*Mission:

*Position Type (current):

*Job Title (current):

*PID:

*Nationality:

*Surname:

*Given Name:

*Date of Birth:

*Gender:

Male Female

*Duty Office City:

*State:

*Zip Code:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.17830.0

***Change Request Types:**

- Change of Duty Address
- Change of Residence Address
- Change of Nationality/Issuance of Green Card
- Arrival of Dependent at Later Date (including births)
- Change of Marital Status
- Death of Dependent or Member of Household
- Departure of Dependent or Member of Household
- New Visa Issued
- Change of Designation To/From DCM or Chargé
- Change to Justified Student Family Member
- Change of Name
- Change of Job title
- Change to Justified Handicap Family Member

*PID: *Nationality:

*Surname: *Given Name:

*Date of Birth: *Gender: Male Female

*Duty Office City: *State: *Zip Code:

Change Duty Address:

- a. Effective Date
- b. Remarks

Change of duty address is only used to report a change of the Principal's job location address. Change of duty address is not used to report a change in address for the mission. Change of duty address for the Principal must be to the Embassy, Consulate or an office/annex in the local area. This form should not be used for a change of duty address outside your immediate area.

*Duty Address:

*Effective Date:

2. Change of Residence Address:
 - a. Residence Country:
 - i. United States
 - ii. Canada
 - iii. Mexico
 - b. Effective Date
 - c. Type of Property:
 - i. Personal
 - ii. Government
 - d. Ownership of Property:
 - i. Owned
 - ii. Leased
 - e. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » NOTIFICATION OF CHANGE

Change of Residence Address | Page 2 of 3 | [Instructions](#)

***Residence Country:**
 United States Canada Mexico

***Street Number:** ***Street Name:** **Street/Road:** **Quadrant:**

Unit Type: **Unit Number:**

***City:** ***State:** ***Zip Code:**

***Phone Number:** **Extension:** ***Effective Date:**

Type of Property:
 Personal Government

Ownership of Property:
 Owned Leased

3. Change of Citizenship/Issuance of Green Card:
 - a. To whom do these changes apply:
 - i. Principal
 - ii. Dependent
 - b. Dependent Information:
 - i. PID Number
 - ii. Date of Birth
 - iii. Relationship
 - c. Effective Date
 - d. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Principal/Subject Information | Page 1 of 3 | [Instructions](#)

*Change Request Types:

Change of Nationality/Issuance of Green Card

Principal's Information

*Mission:

*Position Type (current):

*Job Title (current):

*PID:

*Nationality:

*Surname:

*Given Name:

*Date of Birth:

*Gender:

Male Female

*Duty Office City:

*State:

*Zip Code:

*To whom do these changes apply:

Principal: Dependent:

Dependent Information

*PID:

*Surname:

*Given Name:

*Date of Birth:

*Relationship:

[HOME](#) » [PERSON MANAGEMENT](#) » NOTIFICATION OF CHANGE

Change of Citizenship/Issuance of Green Card | Page 2 of 3 | [Instructions](#)

New Citizenship Issuance of Green Card

Change of Citizenship

*Country of Citizenship:

*Effective Date:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

[HOME](#) » [PERSON MANAGEMENT](#) » NOTIFICATION OF CHANGE

Change of Citizenship/Issuance of Green Card | Page 2 of 3 | [Instructions](#)

New Citizenship **Issuance of Green Card**

Issuance of Green Card

*Green Card Number: *Expiration Date:

*Effective Date:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

4. Birth/Adoption/Arrival of Dependent at Later Date:
 - a. Was the individual an official or the dependent of an official previously assigned to any post in the United States?:
 - i. None
 - ii. Unknown/Yes
 - b. PID Number
 - c. Birth Citizenship
 - d. I-94 Number
 - e. I-94 Expiration Date (leave blank for D/S)
 - f. I-94 Classification Type
 - g. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Birth/Adoption/Arrival of Dependent at Later Date | Page 2 of 3 | [Instructions](#)

***Was the individual an official or the dependent of an official previously assigned to any post in the United States?**

Yes None/Unknown

***PID:** ***Surname:** ***Given Name:**

***Date of Birth:** ***Citizenship:** ***Birth City:**

***Birth Country:** ***Birth Citizenship:** **Arrival Date:**

***Relationship:** ***Gender:**

*** Visa Foil Number:**

Note: If the visa foil number is entered incorrectly, the transaction will be returned to the mission.

***I-94 Number:** **I-94 Expiration Date (leave blank for D/S):** ***I-94 Classification Type:**

5. **Change of Marital Status:**
 - a. **Change Date**
 - b. **Change Reason: Other**
 - c. **PID Number**
 - d. **Relationship**
 - i. **Same Sex Domestic Partner**
 - ii. **Spouse**
 - e. **Dependents to be included in the marital status change:**
 - i. **PID Number**
 - ii. **Surname**
 - iii. **Given Name**
 - iv. **Date of Birth**
 - v. **Gender**
 - vi. **Birth City**
 - vii. **Current Citizenship**
 - viii. **Birth Country**
 - ix. **Relationship**
 - f. **Remarks**

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Change of Marital Status | Page 2 of 3 | [Instructions](#)

This request is for a marriage between two active persons with existing PIDS. If the new spouse has not been assigned a PID, please submit a "Notification of Change: Arrival of Dependent at a Later Date" request.

| | | | | | |
|----------------------|------------------------|------------------------------|----------------------|---|----------------------|
| *Change Date: | | *Change Reason: | | | |
| <input type="text"/> | | <input type="text"/> | | | |
| *PID: | *Surname: | *Given Name: | Other Name: | *Birth Date: | *Gender: |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| *Birth City: | *Birth Country: | *Current Citizenship: | | *Relationship: | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | <input type="text" value="SAME SEX DOMESTIC PARTNER"/> <input type="text" value="SPOUSE"/> | |

DEPENDENTS:

Please click the Add Dependents button to add dependents to be included in the marital status change.

Please remember to update your Visa or your request will be rejected.

HOME » PERSON MANAGEMENT » NOTIFICATION OF CHANGE

Change of Marital Status | Page 2 of 3 | [Instructions](#)

Enter Dependent Information ✕

***PID:** ***Surname:** ***Given Name:** ***Date of Birth:**

***Gender:** **Birth City:** **Current Citizenship:**

Birth Country:

***Relationship:**

Please remember to update your Visa or your request will be rejected.

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

- 6. **Death of Dependent or Member of Household:**
 - a. PID Number
 - b. Remarks

HOME » PERSON MANAGEMENT » NOTIFICATION OF CHANGE

Death of Dependent or Member of Household | Page 2 of 3 | [Instructions](#)

***PID:**

***Surname:** ***Given Name:**

***Date of Death:**

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

- 7. Departure of Dependent or Member of Household:
 - a. PID Number
 - b. Date of Birth
 - c. Gender
 - d. Relationship
 - e. Birth City
 - f. Birth Country
 - g. Citizenship
 - h. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Departure of Dependent or Member of Household | Page 2 of 3 | [Instructions](#)

| | | | |
|---------------------------------------|-------------------------------------|-------------------------------------|--------------------------------|
| *PID: | | | |
| <input type="text"/> | | | |
| *Surname: | *Given Name: | *Date of Birth: | *Gender: |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="v"/> |
| *Departure Date: | *Relationship: | | |
| <input type="text"/> | <input type="text" value="v"/> | | |
| *Birth City: | *Birth Country: | | |
| <input type="text"/> | <input type="text" value="v"/> | | |
| *Citizenship: | | | |
| <input type="text" value="v"/> | | | |
| <input type="button" value="Cancel"/> | <input type="button" value="Back"/> | <input type="button" value="Next"/> | |

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

- 8. New Visa Issued:
 - a. To whom do these changes apply:
 - i. Principal
 - ii. Dependent
 - b. Dependent Information:
 - i. PID Number
 - ii. Date of Birth
 - iii. Relationship
 - c. Visa Foil Number
 - d. Visa Issue Date
 - e. Expiration Date
 - f. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

New Visa Issued | Page 2 of 3 | [Instructions](#)

*** Visa Foil Number:**

Note: If the visa foil number is entered incorrectly, the transaction will be returned to the mission.

***Visa Issue Date:**

***Expiration Date:**

Cancel

Back

Next

9. Change of Designation To/From DCM or Chargé (not included on DS-2006):
 - a. Principal's Information
 - i. Mission
 - ii. Position Type (current)
 - iii. Job Title (current)
 - iv. PID Number
 - v. Nationality
 - vi. Surname
 - vii. Given Name
 - viii. Date of Birth
 - ix. Gender:
 1. Male
 2. Female
 - x. Duty Office City
 - xi. State
 - xii. Zip Code
 - b. Old Title:
 - i. Chargé d'Affaires
 - ii. Deputy Chief of Mission
 - iii. None
 - c. New Title:
 - i. Ambassador Chief of Mission
 - ii. Chargé d'Affaires
 - iii. Deputy Chief of Mission
 - iv. None
 - d. Effective Date
 - e. Document: PROOF OF NAME CHANGE
 - f. Remarks

HOME » PERSON MANAGEMENT » NOTIFICATION OF CHANGE

Principal/Subject Information | Page 1 of 3 | [Instructions](#)

*Change Request Types:

Change of Designation To/From DCM or Chargé

Principal's Information

*Mission:

*Position Type (current):

*Job Title (current):

*PID: *Nationality:

*Surname: *Given Name:

*Date of Birth: *Gender: Male Female

*Duty Office City: *State: *Zip Code:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

HOME » PERSON MANAGEMENT » NOTIFICATION OF CHANGE

Change of Designation To/From DCM or Chargé:

| Page 2 of 3 | [Instructions](#)

*Old Title: Chargé d'Affaires: Deputy Chief of Mission: None:

*New Title: Ambassador Chief of Mission: Chargé d'Affaires: Deputy Chief of Mission: None:

*Effective Date:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

Documents

| These documents are required to process your request. | 0 of 1 required documents uploaded | |
|---|---------------------------------------|---------------------------------------|
| Item | Filename | |
| PROOF OF NAME CHANGE | <input type="button" value="Upload"/> | <input type="button" value="Remove"/> |

| These documents are optional, unless specifically requested by the Department of State. | 0 of 1 optional documents uploaded | |
|---|---------------------------------------|---------------------------------------|
| Item | Filename | |
| <i>Upload additional documents as necessary.</i> | <input type="button" value="Upload"/> | <input type="button" value="Remove"/> |

NOTE: Uploaded documents are no longer visible on this page once you have submitted your request.

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

10. Change to Justified Student Family Member (not included on DS-2006):

a. Principal's Information:

- i. Mission
- ii. Position Type (current)
- iii. Job Title (current)
- iv. PID Number
- v. Nationality
- vi. Surname
- vii. Given Name
- viii. Date of Birth
- ix. Gender:
 - 1. Male
 - 2. Female
- x. Duty Office City
- xi. State
- xii. Zip Code

b. Justified Student Family Member:

- i. Surname
- ii. Given Name
- iii. PID Number
- iv. Date of Birth

c. Document: STUDENT JUSTIFICATION DOCUMENT

d. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Principal/Subject Information | Page 1 of 3 | [Instructions](#)

***Change Request Types:**

Change to Justified Student Family Member

Principal's Information

***Mission:**

***Position Type (current):**

***Job Title (current):**

***PID:** ***Nationality:**

***Surname:** ***Given Name:**

***Date of Birth:** ***Gender:** Male Female

***Duty Office City:** ***State:** ***Zip Code:**

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Change to Justified Student Family Member | Page 2 of 3 | [Instructions](#)

Please note that student must be 21 years or older.

***Surname:** ***Given Name:**

***PID:** ***Date of Birth:**

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

Documents

| These documents are required to process your request. | | 0 of 1 required documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| STUDENT JUSTIFICATION DOCUMENT | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

| These documents are optional, unless specifically requested by the Department of State. | | 0 of 1 optional documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| <i>Upload additional documents as necessary.</i> | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

NOTE: Uploaded documents are no longer visible on this page once you have submitted your request.

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

11. **Change of Name:**
 - a. **To whom do these changes apply:**
 - i. **Principal**
 - ii. **Dependent**
 - b. **Dependent Information:**
 - i. **PID Number**
 - ii. **Surname**
 - iii. **Given Name**
 - iv. **Date of Birth**
 - v. **Relationship**
 - c. **Remarks**

Principal/Subject Information | Page 1 of 3 | [Instructions](#)

*Change Request Types:

Change of Name

Principal's Information

*Mission:

*Position Type (current):

*Job Title (current):

*PID:

*Nationality:

*Surname:

*Given Name:

*Date of Birth:

*Gender:

Male Female

*Duty Office City:

*State:

*Zip Code:

*To whom do these changes apply:

Principal: Dependent:

Dependent Information

*PID:

*Surname:

*Given Name:

*Date of Birth:

*Relationship:

Cancel

Next

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Change of Name | Page 2 of 3 | [Instructions](#)

Previous Name

Surname: NAMELAST Given Name: NAMEFIRST

New Name:

*Surname: *Given Name:

*Reason: **Description:**

OTHER

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

Documents

| These documents are required to process your request. | | 0 of 1 required documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| PROOF OF NAME CHANGE | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

| These documents are optional, unless specifically requested by the Department of State. | | 0 of 1 optional documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| <i>Upload additional documents as necessary.</i> | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

NOTE: Uploaded documents are no longer visible on this page once you have submitted your request.

Office of Foreign Missions | Department of State | United States of America | Version 2.0.29048.0

- 12. Change Job Title:
 - a. Is This a New Position:
 - i. Yes
 - ii. No
 - b. New Functional Title
 - c. Head of Post:
 - i. Yes
 - ii. No
 - d. Document: DIPLOMATIC NOTE
 - e. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Change Job Title | Page 2 of 3 | [Instructions](#)

Is This a New Position:

Yes No

***New Job Title:**

New Functional Title:

***Effective Date:**

Head of Post:

Yes No

Cancel

Back

Next

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

Documents (Change Job Title)

| These documents are required to process your request. | | 0 of 1 required documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| DIPLOMATIC NOTE | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

| These documents are optional, unless specifically requested by the Department of State. | | 0 of 1 optional documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| <i>Upload additional documents as necessary.</i> | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

NOTE: Uploaded documents are no longer visible on this page once you have submitted your request.

13. Change to Justified Handicap Family Member: (not included on DS-2006)

a. Principal's Information:

- i. Mission
- ii. Position Type (current)
- iii. Job Title (current)
- iv. PID Number
- v. Nationality
- vi. Surname
- vii. Given Name
- viii. Date of Birth
- ix. Gender:
 - 1. Male
 - 2. Female
- x. Duty Office City
- xi. State
- xii. Zip Code

b. Justified Handicap Family Member:

- i. Surname
- ii. Given Name
- iii. PID Number
- iv. Date of Birth

c. Document: HANDICAP JUSTIFICATION DOCUMENT

d. Remarks

HOME » PERSON MANAGEMENT » NOTIFICATION OF CHANGE

Principal/Subject Information | Page 1 of 3 | [Instructions](#)

*Change Request Types:

Change to Justified Handicap Family Member

Principal's Information

*Mission:

*Position Type (current):

*Job Title (current):

*PID:

*Nationality:

*Surname:

*Given Name:

*Date of Birth:

*Gender:

Male Female

*Duty Office City:

*State:

*Zip Code:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

HOME » PERSON MANAGEMENT » NOTIFICATION OF CHANGE

Change to Justified Handicap Family Member | Page 2 of 3 | [Instructions](#)

*Surname:

*Given Name:

*PID: *Date of Birth:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

Documents

| These documents are required to process your request. | | 0 of 1 required documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| HANDICAP JUSTIFICATION DOCUMENT | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

| These documents are optional, unless specifically requested by the Department of State. | | 0 of 1 optional documents uploaded | |
|---|--|------------------------------------|---|
| Item | | Filename | |
| <i>Upload additional documents as necessary.</i> | | | <input type="button" value="Upload"/> <input type="button" value="Remove"/> |

NOTE: Uploaded documents are no longer visible on this page once you have submitted your request.

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

14. Remarks

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Notification of Change User Input Review | Page 3 of 3 | [Instructions](#)

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the application.

Principal's Information:

Mission Name:

DC - WASHINGTON - EMBASSY OF CANADA

Position Type:

Job Title: MINISTER

PID: 12345678

Name: NAMELAST, NAMEFIRST

Gender: F

Date of Birth: 10/16/2017

Nationality: CANADIAN

Duty Office Address: CITY, AL 12345

Change Information:

New Duty Address:

New Duty Address:

2825 ROCK CREEK DR NW WASHINGTON, DC
20008

Effective Date: 10/16/2017

Request Remarks:

There are no existing remarks

Add a Remark:

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0

DS-2006 Form / Notification of Change Request: eGov pages

[HOME](#) » [PERSON MANAGEMENT](#) » [NOTIFICATION OF CHANGE](#)

Notification of Change User Input Review | Page 3 of 3 | [Instructions](#)

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the application.

Principal's Information:

Mission Name:

DC - WASHINGTON - EMBASSY OF CANADA

Position Type:

Job Title: MINISTER

PID: 12345678

Name: NAMELAST, NAMEFIRST

Gender: F

Date of Birth: 10/16/2017

Nationality: CANADIAN

Duty Office Address: CITY, AL 12345

Change Information:

Change of Designation To/From DCM or Chargé:

Old Title: NONE

New Title: CHARGÉ D'AFFAIRES

Effective Date: 10/16/2017

Attachments

| Filename | Description |
|-------------------|----------------------|
| chrysanthemum.jpg | Proof of Name Change |

Request Remarks:

There are no existing remarks

Add a Remark:

Cancel

Back

Submit

Office of Foreign Missions | Department of State | United States of America | Version 2.0.31455.0