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 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 the form.

 Give telephone number and email address of office which can be contacted for further information, if necessary.
- 2 Enter an "X" in the box to indicate if the officer is a DIPLOMATIC or CONSULAR officer. Enter and "X" to indicate the type of office or mission to which the officer is assigned.
- Enter the officer's full name in the order specified: (a) surname; (b) given name; (c) prefix such as Mr., Mrs., Ms., or Miss, military rank, or title; (d) suffix, such as Jr. or Sr.; (e) maiden name. Type "X" to indicate if male or female.

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 officer's date of birth (mm-dd-yyyy).
- 6 Enter nationality at birth, even if the same as No. 4.
- 7 Enter officer's place of birth city and country or state.
- 8 Enter "X" in box indicating type of passport.

- g Enter "X" in box indicating type of United States visa held in passport
- 10 Enter date (mm-dd-yyyy), of arrival in the United States and port of entry.
- Enter residence address (not duty address unless actually living and working at the same location), in the United States where officer currently resides. If temporary (hotel, etc.), use Form DS-2006 to notify the Department of State when officer moves to a permanent address.
- Enter the name, address, and telephone number of foreign embassy, mission or post where the officer will be assigned.
- Enter the name, address, and telephone number of the actual office or annex where the officer will be working, if different from No. 12.

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.

- Enter title of position, e.g. Minister (*Political*), Attache (*Agriculture*), *Third Secretary* (*Commercial*), Consul General, etc. Enter "X" in box if officer is the head of a post or mission or Deputy Head of Mission.
- [15] Enter the date (mm-dd-yyyy) officer assumed present official duties in the United States.
- [16] Enter the date (mm-yyyy), (approximate) that officer will terminate duties in the United States.
- 17 Enter name, title and Personal Identification Number (PID), if available, of the person the officer is replacing. Enter date (mm-yyyyy), of termination of predecessor. If new position, so state.

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.

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).

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.

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.

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 and attachments to

U.S. Department of State 3507 International Place, NW Washington, DC 20008-3034

ANY CHANGES IN THE INFORMATION PROVIDED ON THIS FORM SHOULD BE REPORTED AS SOON AS POSSIBLE USING NOTIFICATION OF CHANGE, FORM DS-2006.

DS-2003 Instruction page 2 of 2

OMB APPROVAL NO. 1405-0105 EXPIRATION DATE: XX-XX-20XX ESTIMATED BURDEN: 25 MINUTES*

| U.S. Department of State | | | | EOTIMATED BONDEN. 23 MINOTES | | | | | | | |
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| 1. From (Name of Embassy Mission) 2. Type of Officer Embassy Mission To International Organization Embassy Mission To International Monetary Fund Consular Embassy Consults Cons | Me annelly. | NOTIFICATION OF OF FOREIGN DIPLO | APPOINTMENT MATIC OFFICER | | | | | | | | |
| | TO: | Secretary of State, Attention - Departm | ent of State | PID Recognition Date (mm-dd-yyyy) | | | | | | | |
| 3. Full Name (a) Sumame (Last) (b) Given Name (c)Prefix or Rank (d) Suffix (e) Maiden 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 Diplomatic Official Regular Other Port of Entry Port of Entry Port of Entry 11. Residence Address Temporary Permanent Number Street (Ave., Bivd., Place, Etc.) Apt. City State Zip Telephone 13. Duty Office (If different from employing office) Name of Office Number Street (Ave., Bivd., Place, Etc.) Suite City State Zip 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? No If Yes, give position and duty office: | 1. F | rom (Name of Embassy/Mission) | | Embassy Mission To International Organization World Bank International Monetary Fund | | | | | | | |
| (a) Surname (Last) (b) Given Name (c)Prefix or Rank (d) Suffix (e) Maiden Maile Female | Cont | act Name, Telephone Number and Email Address | | | | | | | | | |
| 4. Current Citizenship 5. Date of Birth (mm-dd-yyyyy) 6. Citizenship at Birth 7. Place of Birth (City, Country) 8. Type of Passport Diplomatic Official Regular Other Other Official Regular Other | 3. | Full Name | | | | | | | | | |
| 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 10. Last Arrival in U.S.A. Date (mm-dd-yyyy) Port of Entry Port of Entry 11. Residence Address Temporary Permanent Number Street (Ave., Blvd., Place, Etc.) Apt. City State Zip Telephone 12. Employing Office Number Street (Ave., Blvd., Place, Etc.) Suite City State Zip Telephone Ext. 14. Job Title Head of Mission? Yes No Mission? Yes No 15. Date of Birth (mm-dd-yyyy) 16. Expected Date of Departure (mm-yyyy) 17. Name, Title and PID (If available) of Predecessor and Date (mm-yyyy) 18. Will Officer Serve in Another Official Capacity? Telephone Text. There Any Immediate Family Members Employed By A Foreign Government in The United States? | | (a) Surname (Last) | | (b) Given Name | | | | | | | |
| 6. Citizenship at Birth 7. Place of Birth (City, Country) 8. Type of Passport Diplomatic Official Regular Other 9. Type of VISA A1 A2 Other G1 G2 G3 G4 (Specify type) 10. Last Arrival in U.S.A. Date (mm-dd-yyyy) Port of Entry Port of Entry 11. Residence Address Temporary Permanent Number Street (Ave., Blvd., Place, Etc.) Apt. City State Zip Telephone 12. Employing Office Name of Office Number Street (Ave., Blvd., Place, Etc.) Suite City State Zip Telephone Ext. 14. Job Title Head of Yes No Mission? Yes No Mission? 15. Date of Entry on Duty (mm-dd-yyyyy) 16. Expected Date of Departure (mm-yyyyy) 17. Name, Title and PID (If available) of Predecessor and Date (mm-yyyyy) 18. Will Officer Serve in Another Official Capacity? Government in The United States? | | (c)Prefix or Rank (d) Suffix | (e) Maiden | Male Female | | | | | | | |
| 8. Type of Passport Diplomatic Official Regular Other 10. Last Arrival in U.S.A. Date (mm-dd-yyyy) Port of Entry Port of Entry Port of Entry 11. Residence Address Temporary Permanent Number Street (Ave., Blvd., Place, Etc.) Apt. City State Zip Telephone 12. Employing Office Number Street (Ave., Blvd., Place, Etc.) Suite City State Zip Telephone Ext. 14. Job Title Head of Mission? Yes No Mission? Yes No Mission? Yes No 16. Expected Date of Departure (mm-yyyyy) 17. Name, Title and PID (If available) of Predecessor and Date (mm-yyyy) of Termination 19. Are There Any Immediate Family Members Employed By A Foreign Government in The United States? | 4. 0 | Current Citizenship | | 5. Date of Birth (mm-dd-yyyy) | | | | | | | |
| Diplomatic Official Regular Other A1 A2 Other G1 G2 G3 G4 G4 Specify type) | 6. 0 | Citizenship at Birth | | 7. Place of Birth (City, Country) | | | | | | | |
| Date (mm-dd-yyyy) Port of Entry Number Street (Ave., Blvd., Place, Etc.) Apt. City State Zip Telephone 13. Duty Office (If different from employing office) Name of Office Name of Office Number Street (Ave., Blvd., Place, Etc.) Suite City State Zip Telephone Ext. Telephone Ext. 14. Job Title Head of Mission? Yes No Deputy Head of Mission? Yes No 15. Date of Entry on Duty (mm-dd-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: Output Number Street (Ave., Blvd., Place, Etc.) Suite Name of Office | | | | A1 A2 Other(Specify type) | | | | | | | |
| 13. Duty Office Name of Office Name | | ate (mm-dd-yyyy) | _ | Number Street (Ave., Blvd., Place, Etc.) Apt. City State Zip | | | | | | | |
| Number Street (Ave., Blvd., Place, Etc.) Suite Number Street (Ave., Blvd., Place, Etc.) Suite City State Zip Telephone Ext. 14. Job Title Head of Mission? Yes No Deputy Head of Mission? 15. Date of Entry on Duty (mm-dd-yyyyy) 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: Number Street (Ave., Blvd., Place, Etc.) Suite City Telephone Ext. 15. Date of Entry on Duty (mm-dd-yyyyy) 17. Name, Title and PID (If available) of Predecessor and Date (mm-yyyyy) of Termination | 12. | Employing Office | | ' | | | | | | | |
| Telephone Ext. Telephone Ext. 14. Job Title 15. Date of Entry on Duty (mm-dd-yyyy) Head of Mission? Yes No Deputy Head of Mission? 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? Yes No If Yes, give position and duty office: 19. Are There Any Immediate Family Members Employed By A Foreign Government in The United States? | _ | | re, Etc.) Suite | | | | | | | | |
| 14. Job Title Head of Mission? Yes No Deputy Head of Mission? 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? Yes No If Yes, give position and duty office: 19. Are There Any Immediate Family Members Employed By A Foreign Government in The United States? | _ | • | | | | | | | | | |
| Mission? Yes No Mission? 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? Yes No If Yes, give position and duty office: 19. Are There Any Immediate Family Members Employed By A Foreign Government in The United States? | | | Ext. | | | | | | | | |
| Yes No If Yes, give position and duty office: Government in The United States? | Mission? Yes No Mission? Yes No | | | , , , | | | | | | | |
| Fight and the state of the stat | 18. | | | Government in The United States? | | | | | | | |

| | 20. All previous assignments within the United States (If not listed in item 21 below, including study and training) (List To/From (mm-yyyy)) | | | | | | | | | | | | |
|---|---|-------------------|---|--------------------------------|------------|-----------------|-----------------------------|----------|--------------|---------------|-----|--|--|
| | | | | | | | | | | | | | |
| 21. | | | emic studies/other activities within past fi et To/From (mm-yyyy)) | ve years <i>(D</i> | ates, natu | ure of activity | /, and locatio | on - | | | | | |
| 22 | Family Member | s Residing in ho | usehold in the United States (Use DS-2) | 007 continu | ation she | et if necessa | urv: Staple to | this fo | orm) | | | | |
| | (a) Surname (L | | 2007/01/2 11/4 07/11/02 07/2/00 70/2/02 20 20 | (b) Given Name | | | ry, Glapio le | | <i></i> | | | | |
| | (c) Prefix | (d) Suffix | (e) Maiden | (f) Other | (f) Other | | (g) Relationship | | Male Female | | | | |
| Date of Birth (mm-dd-yyyy) Place of Birth (City, Country) | | | Citizenship | | | | VISA Status (Attach copies) | | | s) | | | |
| 23. | Please indicate Yes | if requesting ide | intification cards for dependent: | | | | | · | | | | | |
| 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 respect the laws of the receiving state (Vienna Convention on Diplomatic Relations, 1961, Article 41; Vienna Convention on Consular Relations, 1963, Article 55). ANY CHANGES IN THIS INFORMATION MUST BE REPORTED IMMEDIATELY | | | | | | | | | | | | | |
| TO THE DEPARTMENT (CHANGE) Signature of Applicant | | | CHANGE) | TATE (USE FORM DS-2006, I | | | Date (mm-dd-yyyy) | | | | | | |
| Chief of Mission or Authorized Deputy (E. | | | | | | | | | (Eml | bassy Seal, |) | | |
| | | | Signature of Chief of Mission or | f Mission or Authorized Deputy | | | Date (mm-dd-yyyy) | | | | | | |
| Tł | ne Privacy Act of 19 | 974, as amended. | PRIVACY ACT and PAPERWOR 5 U.S.C. 552a, contains provisions regarding | | | | | of infor | rmation abou | It United Sta | tes | | |

The Privacy Act of 1974, as amended, 5 U.S.C. 552a, contains provisions regarding the maintenance, collection, use, and dissemination of information about United States citizens and aliens lawfully admitted for permanent residence in the United States. The following information is provided in accordance with subsection (e)(3) of the Privacy Act.

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

PURPOSE: The principal purpose for the collection of this information is to notify the U.S. Department of State of the appointment of foreign diplomatic officers or career consular officers so the Department can therefore extend various privileges and benefits granted by the above-cited authorities which are predicated upon review and acceptance of this information by the U.S. Department of State.

ROUTINE USES: The principal users of this information are offices within the U.S. 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 U.S. Department of State as covered under STATE 36, Security Records. Information may also be provided to other government agencies having statutory or other lawful authority to maintain such information. Names of the members of diplomatic staff, office addresses, titles, and names of spouses are published quarterly in the Diplomatic List, U.S. Department of State Publication 10424. Names of Consular Officers, titles, and office addresses are published semi-annually in Foreign Consular Offices in the United States, U.S. Department of State Publication 10277.

DISCLOSURE: Providing this information is mandatory. Failure to provide the information requested on this form may prevent acceptance and the extension of benefits to

*Public reporting burden for this collection of information is estimated to average 25 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: M/OFM, 3507 International Place NW, Washington, DC 20008.

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