



Department of Immigration

TRUSTED TRAVELLER PROGRAMME

1. Full Name: _____
2. Date of Birth: _____ Gender: M ____ F ____
3. Nationality: _____
4. Passport Number: _____ Expiry Date: _____
5. Purpose of Travel: _____
6. Job Title: _____
7. Place of Employment: _____
8. Commencement Date: _____ Departure Date: _____
9. UID Number (if applicable): _____

FOR OFFICIAL USE ONLY

10. Previous Application Number: _____
 11. Date Received: _____
 12. Application Status: _____
 13. Decision: Approved ____ Refused ____
 14. Authorized by: _____
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NOTE: Approval under the Trusted Traveller Programme permits entry for a maximum of fourteen (14) days. Any false, inaccurate, or misleading information submitted may result in immediate CANCELLATION.