

TEMPORARY CIVIL GOVERNMENT OF FORMOSA & THE PESCADORES
(TAIWAN CESSION)

Application for an ID Card

1	NAME TO BE SHOWN ON CARD	Last		First	Full Middle Name	
	OTHER NAMES USED	Last		First	Full Middle Name	
THE APPLICANT MAY WANT TO REFER TO THE ENGLISH LANGUAGE VERSION OF HIS/HER HOUSEHOLD REGISTRATION DOCUMENT(S) FOR ENGLISH LANGUAGE SPELLING INFORMATION.						
TCGT ID CARD #				SEX <input type="checkbox"/> Male <input type="checkbox"/> Female		
2	MAILING ADDRESS IN TAIWAN (Do Not Abbreviate)	Street Address				
		City/Town		Zip Code		
		TAIWAN				
3	CITIZENSHIP (Check One)	<input type="checkbox"/> Island Citizen of the Taiwan cession qualifying as U.S. national		<input type="checkbox"/> ROC citizen of Mazu or Kinmen areas		<input type="checkbox"/> US citizen <input type="checkbox"/> other
4	EMAIL ADDRESS					THIS FORM SHOULD BE COMPLETED IN ENGLISH
5	RACE/ETHNIC DESCRIPTION (Check One Only – Voluntary)	<input type="checkbox"/> Asian, Asian-American, or Pacific Islander		<input type="checkbox"/> Hispanic	<input type="checkbox"/> Black (Not Hispanic)	<input type="checkbox"/> North American Indian or Alaskan Native <input type="checkbox"/> White (Not Hispanic)
6	DATE OF BIRTH	MM - DD - YYYY		7 PLACE OF BIRTH (Do Not Abbreviate)		
				City/Town	Area, U.S. State, or Foreign Country	
8	(A)MOTHER'S MAIDEN NAME	Last		First	Full Middle Name	
	(B)MOTHER'S DATE OF BIRTH	MM - DD - YYYY		- -		
9	(A)FATHER'S NAME	Last		First	Full Middle Name	
	(B)FATHER'S DATE OF BIRTH	MM - DD - YYYY		- -		
10	Has the applicant ever entered or served in the armed forces of any foreign state including the Republic of China? (If "yes", please indicate the dates of service : Month Year to Month Year) <input type="checkbox"/> No					
		<input type="checkbox"/> Yes <input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> other _____				
11	Has the applicant ever accepted or performed the duties of any office, post, or employment under the government of a foreign state or political subdivision thereof (e.g. central government, county government, etc.) Including the Republic of China? If "yes", provide names of organization(s), position(s) held, and dates served in the space below					
12	HOME PHONE NUMBER () ()			MOBILE PHONE NUMBER		
13	TODAY'S DATE		Month - Day - Year		14 WORK PHONE NUMBER () ()	
				Area Code	Number	
DELIBERATELY FURNISHING (OR CAUSING TO BE FURNISHED) FALSE INFORMATION ON THIS APPLICATION IS IN VIOLATION OF THE SPIRIT OF THE U.S. CONSTITUTION.						
15	Signature (in English)			16 APPLICANT'S CHINESE NAME		
FURTHER EXPLANATORY INFORMATION & ATTACHMENTS						
Additional details regarding any items may be included here or on a separate sheet if necessary				This form is for use in the Taiwan cession.		
DATE AND SIGNATURE OF TCGT STAFF REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW				PLEASE ATTACH TWO 1x1 INCH COLOR PHOTOS		