





PARLIAMENTARY ELECTION 2024 APPLICATION FORM FOR THE INTERNATIONAL OBSERVERS AND MONITORS

Are you an Observer or a Monitor?	
Tick as appropriate	
Full Name:	
Designation:	
Organization:	
Passport Number:	Passport Expiry Date:
Nationality:	
Date of Birth:	
Address in Maldives:	
Contact Number (personal):	
Email Address (personal):	
REPRESENTING ORGANIZATION	
Name:	
Organization's Address:	
Country:	
Contact Number:	
Email Address:	
I hereby agree that all the information above is correct and true. I agree to take full responsibility of my stay in the Maldives for the observation/monitoring of the Parliamentary Elections 2024 and work in accordance with the Acts, Regulations, and adhere to the Code of Conduct mentioned by the Elections Commission.	
Signature:	Date:
 Applicants are requested to submit: 1. Passport Copy 2. Passport size photo 3. Proof of accreditation letter by the representing organization 	
FOR OFFICIAL USE ONLY	
FORM RECEIVED BY	CHECK AND APPROVED/REJECTED BY
Name:	Name:
Designation:	Designation:
Signature:	Signature:
Date:	Date: