Consulate General of Lebanon
New York

قنصلية لبنان العامة
نيويورك

Attach applicant photo:
- 1.9 in x1.4 in
- White background
- Front view full face
- Must be recent

Lebanese Travel Document

1- Reason for request:
◯ Lost passport ◯ Stolen passport ◯ Emergency ◯ Other (*Specify*):

2- Full name:
(Arabic) الشهرة: الاسم الأوسط: الاسم:
(English) First: Middle: Last:

3- Mother full name:
(Arabic) الشهرة: الاسم الأوسط: الاسم:
(English) First: Middle: Last:

4- Father full name:
(Arabic) الشهرة: الاسم الأوسط: الاسم:
(English) First: Middle: Last:

5- Place of birth *(city/state/country):*

6- Date of birth (*month/day/year):*

7- Sex:
◯ Female ◯ Male

8- Marital status:
◯ Single ◯ Married ◯ Divorced ◯ Separated ◯ Widowed

9- Spouse full name *(where applicable):*
(Arabic) الشهرة: الاسم الأوسط: الاسم:
(English) First: Middle: Last:

10- Address in the U.S.A:
Street:
City: State: Zip code:

11- Phone number:
Home: ( )
Cell: ( )

12- Email address:

13- Status in the USA
◯ Citizen ◯ Resident ◯ Tourist ◯ Transit

14- Employer *(in the USA):*

15- Job title:

16- Work address:
Street:
City: State: Zip code:

17- Work phone number:
( )

18- Name & address of relative/friend in Lebanon:
Street:
City:

19- Phone number of relative/friend in Lebanon:
Home: ( )
Cell: ( )

20- Place & number of registration in Lebanon *(where applicable):*
(Arabic) الرقم: البلدة: القضاء:
(English) District: Town or Village: Number:

21- Passport number:

22- Place of issue:

23- Date of issue (*month/day/year*):

24- Expiration date (*month/day/year*):

Travel document is only valid to return to Lebanon.

Applicant's signature: Date:

Kindly select this link for supporting documents & requirements.

9 E 76th St., New York City, N.Y. 10021; www.nylebcons.org; Tel: (212) 744-7905; Fax: (212) 794-1510