



**High Commission of the Independent State of Papua New Guinea
Wellington, New Zealand**

Please fill in this form and return it to the
PNG High Commission along with your
Application for an Entry Permit

DISCLOSURE OF INFORMATION: CONSENT FORM

I, _____
(Surname) (Fore Name)

(Maiden or other names used)

Sex: Female Male

Date and Place of Birth: _____

Nationality: _____

Address in New Zealand: _____

Hereby give consent to the disclosure by the New Zealand Police of any information they may have pursuant to this application, to the **PAPUA NEW GUINEA HIGH COMMISSION**, in **WELLINGTON**, New Zealand.

Signed: _____ Date: _____

Comments by the NZ Police