To: Palestinian Ministry of Civil A	ffairs	
Date:		
	ne Service of Man	[insert full name] hereby request that you n, with information regarding the current status of my [ID number].
Passport # at the time of applicat	tion:	Country of passport:
Date(s) family unification applica	tion submitted to	o the PA:
Name of family member affiliated	d with family unif	fication application:
ID number:		
Relationship to you:		
Signature:		Date:
Phone:		Email:
THE BELOW TO BE COMPLETED E	BY CIVIL AFFAIRS S	STAFF:
Please mark the appropriate box.		
The application referenced above	e is:	
☐With the PA Ministry	of Civil Affairs pe	nding submission to Israeli authorities
If not submitted, please s	state the reason	
$\square$ Submitted to Israeli a	uthorities	
If submitted, please note	date of submissi	ion to Israeli authorities:/

Printed and signed forms can be delivered to Ahmad Al-Qadi at the Al-Haq office in Ramallah, or they can be faxed to: 02-295-4903, Attention: Ahmad Al-Qadi. Alternatively, signed and scanned copies can be emailed to: ahmad@alhaq.org and cc-ed to righttoenter@gmail.com (preferable.)