DEPARTMENT OF GOVERNMENT INFORMATION

APPLICATION FOR MEDIA ACCREDITATION – 2025

Category – Staff Journalist / Media Administrator / Freelance Journalist / Foreign Journalist / Technical

(Please refer the guidelines and Gazette notification (05.12.2024 – No.2413/44) before completing this application)

| | Name in Full: (In block letters / Ensure word spacing) | |
|----|---|------------------|
| 2. | Name with the initials: | |
| 3. | Gender | |
| 4. | National Identity Card Number | |
| 5. | Date of Birth: | Year Month Date |
| 6. | Name of the Media Organization: | |
| 7. | Name of the News Paper / Magazine / TV / Radio / Web / News Agency: | |
| 8. | i. Job Title/Post/ Designation: | |
| | ii. Main functions of the job: | |
| 9. | Previous Accreditation No: (If any) | Year: Photo 1½" |

| 10. i. Address (Office): | | | | | | | | | | | | | | | | | | |
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| ii. Telephone No: | | | | | | | | | | | | | | | | | | |
| iii. Fax No: | | | | | | | | | | | | | | | | | | |
| iv. E-mail: | | | Ī | | | | | | | | | | | | | | | |
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| 11. i. Address (Residence): | | | | | | | | | | | | | | | | | | |
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| ii. Telephone No: | | | | | | | | | | | | | | | | | | |
| iii. Mobile No: | | | | | | | | | | | | | | | | | | |
| iv. Personal e-mail: | | | | | | | | | | | 1 | | | | | | | |
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| Signature of Applicant Recommended by: Director-Ge | neral / | | | | | | ' Gen | | Man | | ••••• | Dat | e | | | vs Ed | itor | / |
| Signature of Applicant Recommended by: Director-Ger News Director / News Manager | neral / | | | | | | ' Gen | | Man | | ••••• | Dat | e | | | rs Ed | itor | / |
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