



Updated on 29 Aug 2014

Use this form to amend your pass holder's personal details

Completing this form

If you have all the right information on hand, this form should take 5 minutes.

Submit the form using iSubmit at www.mom.gov.sg/iSubmit. Select Request type 2 - *Amendment of Personal Particulars for EP / S Pass Holders*.

You will need to send us a copy of the pass holder's passport showing their personal details **and** the supporting documents for the details you wish to amend (see list below).

We aim to respond to you within 7 working days upon receipt of your documents.

Details you wish to amend	Supporting documents you need to submit together with the pass holder's passport (documents not in English must be accompanied with an official English translation)
Name	<ul style="list-style-type: none">• A copy of deed poll of your pass holder's change in name or• A copy of marriage certificate showing your pass holder's change in name after marriage
Date of Birth/ Country of Birth/ Country of Origin	<ul style="list-style-type: none">• A copy of your pass holder's birth certificate showing his/her date of birth, country of birth and country of origin
Marital Status	<ul style="list-style-type: none">• Documentary proof of change in marital status (e.g. marriage certificate, divorce papers)
Old Malaysian Identity Number/ New Malaysian Identity Number/ Malaysian Identity Type	<ul style="list-style-type: none">• A copy of the front and back of your pass holder's new Malaysian Identity Card

About your pass holder

Name	
Foreign Identification No. (FIN)	
Application No.	



Particulars you wish to amend

Personal particulars you wish to amend	Existing details	New details
Name (as on travel document)		
Gender		
Marital Status		
Date of birth (DD-MM-YYYY)		
Nationality		
Country of birth		
Country of origin		
Race		
Religion		
Old Malaysian ID No.		
New Malaysian ID No.		
Malaysian ID type		
Passport number		
Passport expiry date (DD-MM-YYYY)		

Your declaration

I hereby declare that the information provided in this form is true and correct.

Name

Your organisation name

Designation

Your organisation stamp

Contact number

Your signature

Date

(DD-MM-YYYY)