

GLOBAL ENTRY APPLICATION

ORDER FORM

INSTRUCTIONS

Read all instructions and follow carefully

1. Please complete one (1) Global Entry application form per person. Complete the address and employment fields for the last five (5) years in full, leaving NO gaps.

2. Pay the service fee by clicking on the payment button on the website - your application will not be processed without this payment

3. Make clear copies of your valid citizenship and identity documents (i.e. passport, birth / citizenship certificate, PR card, work / study permit, driver's license, etc.)

4. Complete this order form in full, ensuring you have included all requirements on the 'Global Entry Checklist'.

5. Send your entire completed package using one of the following methods:

FAX the entire application package to **(800) 544 - 8311** OR

SCAN AND EMAIL your entire application package to info@globalentryapplication.com with the subject line: (Name of Applicant) Global Entry Application

GLOBAL ENTRY APPLICATION SERVICE

☐ **USD \$139.99 Service Fee**

USD \$100 government fees

The government fee is non-refundable

AVERAGE PROCESSING TIME* 6-8 WEEKS

* Timeline refers to initial review by the government. Additional delays are possible if the government does additional checks.

GLOBAL ENTRY CHECKLIST

Include the following documents in your Global Entry package

☐ **GLOBAL ENTRY APPLICATION FORM**

completed and signed - all forms must be included, even if blank

☐ **GLOBAL ENTRY APPLICATION ORDER FORM (this page)**

- applications submitted without this form will not be processed

☐ **COPY OF VALID CITIZENSHIP DOCUMENT**

-i.e. passport, citizenship certificate, birth certificate, etc.

☐ **COPY OF VALID ADMISSIBILITY DOCUMENT**

-i.e. passport, PR card, work/study permit, etc.

☐ **COPY OF VALID DRIVERS LICENSE**

-if applicable

☐ **COPY OF FRONT AND BACK OF EXPIRING GLOBAL ENTRY CARD**

- renewals only

APPLICATIONS SUBMITTED WITHOUT THIS ORDER FORM WILL NOT BE PROCESSED

ADDITIONAL INFORMATION

* You will receive an email with your login details for the government website

* Initial review of your application entails background checks in the US

* Once you have been conditionally approved, you can schedule an interview; you must schedule this interview within 30 days of approval

* Once you attend your interview and have been approved, your card will be mailed to you at the address you provide

* Sending incomplete applications will delay processing

PAYMENT INFORMATION

PayPal Email Address

By signing below I agree to pay the additional \$100 government fee using the credit card detailed below.

We accept Visa, Mastercard and Amex

Cardholder Name

Card Number

Expiry Date

CVV Code

What is the CVV code? www.sti.nasa.gov/cvv (The last 3 digits on the back of the card above the signature **or** 4 digits for American Express on the front above the card number)

Sign / Type Authorization

DISCLAIMER

The applicant agrees to all of the following conditions

* I assert that I have read and agreed to the terms and conditions as listed on <https://globalentryapplication.com/terms-of-use/>

* Global Entry Application.com is not responsible for applications sent by mail or improperly submitted by email or fax

* Global Entry Application.com is not responsible for applications that are denied

* Global Entry Application.com is not responsible for delays caused by incomplete applications

* The service fees is non-refundable once applications are submitted to the government

* Government fees are non-refundable in all cases

* I assert that I understand I am using Global Entry Application.com to apply for my Global Entry card

* I agree the government fee to the credit card provided.

Sign /Type to assert: I understand the terms & conditions of service

GLOBAL ENTRY APPLICATION

Reason for application:

☐ First time applicant

☐ Renewal - Please provide your membership ID:

Membership ID

Password

Surname (current):

First name:

Middle name:

Nickname:

Gender: ☐ Male ☐ Female

Eye color:

Height

ft.

in.

or

cm.

Reconfirmation required

Full name at birth:

Other previous names (marriages, legal name changes, etc.):

Date of birth (YYYY/MM/DD):

Place of birth

City

State/
Province

Country

Your contact information

Home phone

Email

Cell Phone

Work phone

Citizenship Information

Are you a US citizen? ☐ Yes ☐ No

Are you a permanent resident of the US? ☐ Yes ☐ No

If you are not a US citizen, please specify your citizenship:

The following information is required if you have any of the documents below:

☐ Passport

Document number

Country of Issuance

Name as it appears on the document

Expiry date (yyyy/mm/dd)

☐ Passport
(2)

Document number

Country of Issuance

Name as it appears on the document

Expiry date (yyyy/mm/dd)

☐ Citizenship
document

Document number

Country of Issuance

Name as it appears on the document

Date Issued (yyyy/mm/dd)

Type of document:

☐ Birth
Certificate

Document number

Country of Issuance

State/Province of Issuance

Name as it appears on the document

Permanent resident status document (for applicants who are not citizens of the US)

<input type="checkbox"/> Permanent resident card	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Document number	Country of Issuance	Name as it appears on the document	Expiry date (yyyy/mm/dd)

If applicable, please provide your visa or a work permit details

<input type="checkbox"/> Visa	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Work permit	Document number	Country of Issuance	Name as it appears on the document	Expiry date (yyyy/mm/dd)
<input type="checkbox"/> Visa	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Work permit	Document number	Country of Issuance	Name as it appears on the document	Expiry date (yyyy/mm/dd)

Do you have a valid driver's license? ☐ Yes ☐ No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Driver's license number	Country of issuance	Province/State	Name as it appears on the document	Expiry date (yyyy/mm/dd)

Is this an enhanced security driver's license? ☐ Yes ☐ No

(An enhanced driver's license (EDL) is a driver's license that has been enhanced to denote both identity and citizenship. An EDL will include a flag icon identifying the license-holder's citizenship)

Is this a a commercial driver's license? ☐ Yes ☐ NoIs there a HAZMAT (hazardous material) endorsement on the CDL? ☐ Yes ☐ No**Please provide the last 5 years of your residential history leaving no gaps****Current residential address:**

From (YYYY/MM)	<input type="text"/>	To present
Street number	<input type="text"/>	Street name <input type="text"/>
Apt. number	<input type="text"/>	City <input type="text"/> Province/State <input type="text"/>
Country <input type="text"/>	PO Box Number <input type="text"/>	Postal/Zip code <input type="text"/>

Is your mailing address same as your Residential address? ☐ Yes ☐ No**If not, please provide your current mailing address below:**

From (YYYY/MM)	<input type="text"/>	To present
Street number	<input type="text"/>	Street name <input type="text"/>
Apt. number	<input type="text"/>	City <input type="text"/> Province/State <input type="text"/>
PO Box Number <input type="text"/>	Postal/Zip code <input type="text"/>	Country <input type="text"/>

Previous address (if applicable):

From (YYYY/MM)	<input type="text"/>	To (YYYY/MM)	<input type="text"/>
Street number	<input type="text"/>	Street name	<input type="text"/>
Apt. number	<input type="text"/>	City	<input type="text"/> Province/State <input type="text"/>
Country	<input type="text"/>	Postal/Zip code	<input type="text"/>

Previous address (if applicable):		From (YYYY/MM)	<input type="text"/>	To (YYYY/MM)	<input type="text"/>
Street number	<input type="text"/>	Street name	<input type="text"/>		
Apt. number	<input type="text"/>	City	<input type="text"/>	Province/State	<input type="text"/>
Country	<input type="text"/>	Postal/Zip code	<input type="text"/>		

Previous address (if applicable):		From (YYYY/MM)	<input type="text"/>	To (YYYY/MM)	<input type="text"/>
Street number	<input type="text"/>	Street name	<input type="text"/>		
Apt. number	<input type="text"/>	City	<input type="text"/>	Province/State	<input type="text"/>
Country	<input type="text"/>	Postal/Zip code	<input type="text"/>		

Please provide the last 5 years of your employment history leaving no gaps. Please specify the periods you were unemployed or a student.

Current employment:

From (YYYY/MM)	<input type="text"/>	To present			
Occupation	<input type="text"/>				
Current Employer's name:	<input type="text"/>				
Street number	<input type="text"/>	Street name	<input type="text"/>		
Apt. number	<input type="text"/>	City	<input type="text"/>	Province/State	<input type="text"/>
Country	<input type="text"/>	Postal/Zip code	<input type="text"/>	Employer's telephone	<input type="text"/>

Previous employment (if applicable)

From (YYYY/MM)	<input type="text"/>	To (YYYY/MM)	<input type="text"/>		
Occupation	<input type="text"/>				
Employer's name:	<input type="text"/>				
Street number	<input type="text"/>	Street name	<input type="text"/>		
Apt. number	<input type="text"/>	City	<input type="text"/>	Province/State	<input type="text"/>
Country	<input type="text"/>	Postal/Zip code	<input type="text"/>	Employer's telephone	<input type="text"/>

Previous employment (if applicable)

From (YYYY/MM)	<input type="text"/>	To (YYYY/MM)	<input type="text"/>		
Occupation	<input type="text"/>				
Employer's name:	<input type="text"/>				
Street number	<input type="text"/>	Street name	<input type="text"/>		
Apt. number	<input type="text"/>	City	<input type="text"/>	Province/State	<input type="text"/>
Country	<input type="text"/>	Postal/Zip code	<input type="text"/>	Employer's telephone	<input type="text"/>

SUPPLEMENTAL ADDRESS HISTORY PAGE

Full five (5) years address history is required. Please fill out if additional space is needed

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Street Number _____ Street Name _____

Apartment # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Street Number _____ Street Name _____

Apartment # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Street Number _____ Street Name _____

Apartment # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

SUPPLEMENTAL ADDRESS HISTORY PAGE

Full five (5) years address history is required. Please fill out if additional space is needed

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Street Number _____ Street Name _____

Apartment # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Street Number _____ Street Name _____

Apartment # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Street Number _____ Street Name _____

Apartment # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

SUPPLEMENTAL EMPLOYMENT HISTORY PAGE

****Please write in your Employment History for the previous five (5) years. Leave no gaps. If you were/are a student write in "Student". If you were/are unemployed write in "unemployed".**

☐ Current ☐ Previous

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Occupation _____

Employer _____

Employer Phone number _____

Street Number _____ Street Name _____

Suite # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

☐ Current ☐ Previous

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Occupation _____

Employer _____

Employer Phone number _____

Street Number _____ Street Name _____

Suite # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

SUPPLEMENTAL EMPLOYMENT HISTORY PAGE

****Please write in your Employment History for the previous five (5) years. Leave no gaps. If you were/are a student write in "Student". If you were/are unemployed write in "unemployed".**

☐ Current ☐ Previous

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Occupation _____

Employer _____

Employer Phone number _____

Street Number _____ Street Name _____

Suite # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____

☐ Current ☐ Previous

DATE FROM (mm/yyyy): _____ DATE TO (mm/yyyy): _____

Occupation _____

Employer _____

Employer Phone number _____

Street Number _____ Street Name _____

Suite # _____

City _____

State/Province _____

Zip/Postal Code _____

Country _____