FOR OFFICE USE



REPUBLIC OF NAMIBIA

Ministry of Home Affairs and Immigration

PASSPORT APPLICATION FORM

				ONLY				
NAM	IIBIAN PASSPORT	DIPL	OMATIC PASSPORT					
OFFICIAL PASSPORT EMERGENCY TR			AVEL CERTIFICATE					
	Identity No.			PASTE PHOTO HERE USE GLUE ONLY				
1.	NAME TO	O APPEAR IN PAS	SPORT					
	Surname			(DO NOT STAPLE)				
	First Name							
	Middle Name(s) (optional)							
	PREVIOUS SURNAME(S)							
	Surname at Birth		Date of departure, if known	Y Y Y M M D D				
	Other Names (if changed)							
2.	PERSONAL INFORMATION							
	Date of Birth Y Y Y M M D D Place of Birth (Town and Country)							
	Sex Male Female Marital Status Single Married Widowed Divorced Separated							
	Hair Eyes Height Weight Occupation							
	Residential Address (No. Street and Town)							
	Telephone Home (Area code and Number) Telephone Work (Area code and Number) Ext.							
	Postal Address							
3.	PREVIOUS NAMIBIA PASSPOR	RT- In the last 5 year	rs has a Namibian Passport bee	n issued to you?				
	Yes or No							
	Numb	er	Date Issued	L. 1. 24 - 24 2				
	If 'Yes', indicate and include it with your application							
4.	CITIZENSHIP - You must provide the documents below (certified photo copies acceptable)							
	If you were born in Namibia If you were born outside Namibia							
	Certificate of Birth		Certificate of citizenship, o	r				
	Certificate number	Date of Issue	Certificate of naturalisation) or				
	or		Certificate of retention of c	itizenship, or				
			Certificate of registration o	f birth abroad				
	Certificate of Citizenship							
	Certificate number	Date of Issue	Certificate number	Date of Issue				

5. MARRIAGE DATA - If the space is inadequate, attach separate sheet.

6.

7.

Date	Spouse's	Spouse's	Spouse's		Citizenship		
of Marriage	Name in Full	Date of Birth	Country of Birth	Before Marriage	At Present		
3.5							
PERSON TO Nand we recomm	NOTIFY IN CASE O end that you provide t	F EMERGENCY he name of a perso	- It is in your own	interest to provide ormally accompan	this information		
Name			Relat	ionship			
Telephone Home		Telephone (Area code and N	Work umber)	F	Ext.		
Postal Address							
DECLARATI(ON OF APPLICANT						
I solemnly declar	e that:						
(i) statements made in this application are true,							
(ii) the photograph enclosed are a true likeness of me,							
(iii) I am a N	lamibian citizen.						
Dated Y Y Y	Y M M D D						
at	Town	Signature of applic in case of children					

	aı	in case of children under	13 years.					
		Town						
8.	CC	OMMISSIONER OF OATH						
		,						
	1.	I have satisfied myself of the identity of the deponent, Mr/Mrs/Miss						
		reflecting his/her citizenship as						
	2.	Before administrating the prescribed oath/solemn declaration, I p her reply in his/her presence.	out the following question to the deponent and noted his/					
		(a) Do you know and understand the contents of the above decla	ration?					
		Reply						
	(b) Have you any objection to making the prescribed oath as binding on your conscience?							
		Reply						
		(c) Do you regard the prescribed oath as binding on your conscient						
		Reply						
	3.							
		Signed:	Commissioner of oaths					
Place	:		Designation (Rank)					
SIGN	HE	HERE ALSO	other Names and Surnames					
		Address:						

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