



HIGH COMMISSION OF THE REPUBLIC OF UGANDA
PRETORIA

CITIZENSHIP VERIFICATION
(To be completed by all fresh applicants)

1. Particulars of Applicant

Full names of applicant
Country of residence
Village, Sub-County and date of birth
.....
County and District of birth
Applicant's tribe/nationality

2. Particulars of Applicant's Parents

Full names of father
Country of residence
Village, Sub-County and date of birth
.....
County and District of birth
Father's tribe/nationality.....
Full name of mother
Maiden name
Country of residence
Village, Sub-County and date of birth
.....
County and District of birth
Mother's tribe/nationality

3. Citizenship of Uganda

- (a) By Descent
 - (i) Give details of clan/generations of origin
 -
 - (ii) Name two contemporary decendants
 -
 - (iii) If born outside Uganda, explain circumstances (i.e. parent's employment outside)
- (b) By birth (attach birth certificate if available)
 - (i) Birth certificate Number issued by
 - (ii) Attach birth certificates of parents
 - (iii) State country of origin and previous nationality of parents

(c) By Registration

(i) Attach photocopy of registration certificate

(ii) State date of renunciation of previous citizenship

(iii) Previous nationality

(d) By Naturalisation

(i) Attach photocopy of naturalisation certificate

(ii) State country of origin

(Delete (a), (b), (c) or (d), whichever does not apply)

4. Declaration

I, the undersigned, hereby apply for the issue of a Uganda Passport. I declare that:-

(i) the information given on this application form is correct to the best of my knowledge and belief.

(ii) I fully understand the legal implications of what I have stated above and as I do accept any legal consequences that may arise out of what I have stated on this form.

Signature

Date

5. Recommendation

I certify that to the best of my knowledge and belief, the facts stated on this form are correct and that the applicant was born in my area of jurisdiction.

.....
Resistance Council I

.....
Resistance Council II

.....
Resistance Council III

.....
Date

I certify that to the best of my knowledge and belief, the facts stated on this form are correct.

.....
Date

.....
District Administrator
(Official Stamp)

Notes:-

(i) This form is to be completed by all fresh applicants who wish to acquire Uganda Passports.

(ii) Applicants falling under Section 3(b) should attach relevant birth certificates.