

APPLICATION FOR NAMIBIAN CITIZENSHIP BY NATURALIZATION

NB: QUALIFIED PERIOD: AFTER FIVE YEARS (LEGAL RESIDENCE)

FORMS AND DOCUMENTS REQUIRED

NOTE: Incomplete forms and outstanding documents will cause unnecessary delays

1. TO BE COMPLETED AND SUBMITTED BY THE APPLICANT

- A. Copy of Permanent Residence Permit
- B. Police Clearance Certificate of country of origin and Namibia
- C. Medical Report
- D. Letter from receiver of revenue confirming period of residence
- E. Two character references (letter from friends who has known you longer than two years)
- F. Job description of yourself and your spouse
- G. Copy of Namibian identity document if you have one
- H. Copy of Birth Certificate
- I. Motivation letter (applicant)

(c) Was it due to registration by virtue of:

(i) Residence in that country

YES NO

(ii) Marriage

YES NO If Yes, state name of spouse:

..... citizenship or nationality of spouse:

..... date and place of marriage

(d) Citizenship acquired by you:

Have you ever been convicted of any crime in any country?

<input type="checkbox"/>	<input type="checkbox"/>
YES	NO

Are you suffering from tuberculosis, any other infections or contagious disease or any mental or physical deficiency?

<input type="checkbox"/>	<input type="checkbox"/>
YES	NO

Particulars if the reply to one or more of the questions is in the affirmative:

.....

.....

Was your father or mother at the time of your birth:

(a) enjoying diplomatic immunity in Namibia under any law relating to diplomatic privileges

<input type="checkbox"/>	<input type="checkbox"/>
YES	NO

(b) career representative of another country?

<input type="checkbox"/>	<input type="checkbox"/>
YES	NO

(c) members of any police, military or security unit seconded for service within Namibia by the government of another country

<input type="checkbox"/>	<input type="checkbox"/>
YES	NO

(d) Illegal immigrants

<input type="checkbox"/>	<input type="checkbox"/>
YES	NO

Particulars if the reply to any one of the questions is in the affirmative:

.....

If your father or mother was born outside the Republic of Namibia state date of entry

B. PARTICULARS OF PARENTS (to be completed by all applicants):

Surname of father		Christian names of Father											
Date of Birth	Place of birth	Naturalisation/Permanent residence permit number and date											
	Town:	(If Father was not born in Namibia)											
	Country:	Identity Number											
Surname of mother		Christian names of mother											
Date of Birth	Place of birth	Naturalisation/Permanent residence permit number and date											
	Town:	(If mother was not born in Namibia)											
	Country:	Identity Number											

C. PARTICULARS OF SPOUSE (to be completed only by applicants who apply for citizenship by virtue of marriage):

Are you married to a Namibian Citizen <input type="checkbox"/> YES <input type="checkbox"/> NO (Attach copy of marriage certificate)	Date and place of marriage	Identity No. of spouse	<table border="1" style="width: 100%; height: 30px;"> <tr> <td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td> </tr> </table>																				
Surname		Christian names																					
Citizen by: Birth <input type="checkbox"/> Descent <input type="checkbox"/> Registration <input type="checkbox"/> Naturalisation <input type="checkbox"/>		Place and Date of Birth Date:..... Town: Country:..... (Copy of birth certificate)																					

D. DECLARATION

I solemnly declare that the above particulars given by me are true in substance and in fact and that I fully understand the meaning thereof

Signature:.....

Date:

Before administering the prescribed oath/solemn declaration, I put the following question to the deponent and noted his/her reply in his/her presence:

(a) Do you know and understand the contents of the above declaration?

Reply.....

(b) Have you any objection to makint the prescribed oath?

Reply.....

(c) Do you regard the prescribed oath as binding on your conscience?

Reply.....

The deponent has acknowledged that he/she knows and understands the contents of the declaration. The declaration was duly sworn to/solemnly affirmed before me and the deponent's signature/thumb print/mark was appended thereon in my presence

Date:

Signature:

Commissioner of Oaths

Place.....

Designation (Rank)

Christian names and Surname

Address:

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This form is exempted from stamp duty