

English	<i>Do not write anything in this box</i>
<p>Answer each question in full Write in bold print with dark ink You may be asked to provide supporting documents for the statements made below</p>	<p>Date of receipt On/...../20.....</p>

Name	Last Name	Sexe	Marital Status
Current Nationality	Date of Birth The/...../.....	Place of Birth	
Have you ever changed your nationality? Are you in the process of changing?	<input type="checkbox"/> No <input type="checkbox"/> Yes (Specify):		Profession

Name & Last Name of the spouse.	Nationality	Age	Profession
Father's Name & Last Name	Nationality	Age	Profession
Mother's Name & Last Name	Nationality	Age	Profession

Permanent residence and address in the Democratic Republic of the Congo	Grouping	Chieftaincy	Sector
	Territory	District	Province
	Post Office Box	Telephone	Email
Residence and address in Kenya	Territory	District	Province
	Post Office Box	Telephone	Email

Type of documents presented	Document number	Date and place of issuance	Expiration date
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Date and place of exit from the Democratic Republic of the Congo	Date and place of entry	Purpose of entry
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Accompanied by
<i>In case of false statements, my signature (my fingerprint) engages my responsibility and exposes me to legal proceedings as provided by Congolese law.</i>