VILLAGE	HAIRPERSON/F	SUB-C	YTNUC	COUNTY		DISTRICT
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OTHER NAME		1,257,000		ARS LIVED HERE		
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SIVEN NAME		GIVEN NAME				
OTHER NAME		OTH	IER NAME			
RIBE		TRIE	BE			
ELAN		CLAN				
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Attach copies of National IDs for at least one parent if living status is alive or blood relative if both position SPARK





## CITIZENSHIP VERIFICATION REVIEW FORM

1. Applicants Personal Information	
Applicant ID:	Sex:
Surname:	
Given Names:	
Other Names	
Date of Birth:	Tribe:
2. Parents Place of Birth	
Father: Tribe:	DoB:
Clan:	
District:	County:
Sub-county:	Parish:
Village:	
Mother: Tribe:	DoB:
Clan:	
District:	County:
Sub-county:	Parish:
Village:	
Reject Reason     Findings of the Citizenship Verification Team	
Citizenship Type: By Birth	By Registration
By Naturalization	Dual Citizenship
Decision reached	
Citizenship Approved Reject	ted Deferred
Supporting Document(s) (specify)	
11 2	***************************************
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Clearance	
a) Name:	Title
Signature:	Date:
b) Name:	Title
Cincohan	
Signature:	Date:



6.