

REPUBLIC OF KENYA THE KENYA CITIZENSHIP AND IMMIGRATION ACT, NO.12

APPLICATION FOR DEPENDANT'S PASS

ADDITO ANTEC DA DELCTITA DO

		icant's PARTICUI iculars to be in capital		THIIX photo		
1.	Full names: Mr./Mrs./Miss					
2.	Contacts (Postal address, telephone number, email address)					
3.	Nationality (Attach passport/national identification card)					
4.	Immigration status (Attach					
4.	exemption)	_				
5.	Relationship to the dependant					
6.	Particulars of other dependants, whether in Kenya or elsewhere, including spouse					
	and children:					
	Full names	Relationship	Age	Resident at		
			•••••			
	PARTICULARS OF DEP	ENDANT				
7.	(a) Full names of dependant: Mr./Mrs./Miss					
	(b) Contact (Postal address, physical address, telephone number, email address)					

	(c) S	(c) Sex			
	(d) M	(d) Marital status (Attach proof of marriage)			
	(e) D	(e) Date and place of birth (Attach birth certificate)			
8.	Passp	Passport Number date and place of issue			
9.	Nationality				
10.	Particulars of any change of dependant's name (Attach proof)				
	I the applicant, declare that the foregoing				
	particulars are correct in every detail.				
	Date				
		Signature of applicant			
	Note:				
	i.	This application cannot be considered unless all the required particulars are completed in full.			
	ii.	One form of application is to be completed in respect of each dependant for whom a pass is required.			
	For o	For official use			
	Dec	ision: Approved/Not Approved/Differed			
	Ren	Remarks:			
	Offi	Officer:			
	Signature:				
	Date	e:			