

SERIAL NO. 179378

FORM 'B'



THE REPUBLIC OF UGANDA

**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 names 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 descendants.....  
.....  
(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 certificate of parents  
(iii) State country of origin and previous nationality of parents.....  
.....

P.T.O

(b) **By registration**

- (i) Attach photocopy of registration
- (ii) State date of renunciation of previous citizenship.....
- (iii) Previous nationality.....

(d) **By naturalisation**

- (i) Attach copy of Naturalisation Certificate.
  - (ii) State county of origin.....
- (Delete (a), (b), (c) or (d) whichever does not apply)*

**4. Declaration**

I, the undersigned, hereby apply for the issue of a Ugandan 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 implication of what I have stated above and as such 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.

.....  
*Local Council I*

.....  
*Local Council II*

.....  
*Local Council III*

.....  
*Date*

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

Date:.....

.....  
Resident District Commissioner  
(Official Stamp)

**Notes:**

- (i) This form to be completed by all fresh applicants who wish to acquire Uganda Passports.
- (ii) Applicants falling under Section 3 (b) should attach relevant birth certifier,