

SERIAL NO.

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.

(c) **By registration**

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

(d) **By naturalisation**

- (i) Attach copy of Naturalisation Certificate.
- (ii) State country of origin .....

*(Delete (a), (b), (c) or (d) whichever does not apply)*

**4. Declaration**

I, the undersigned, hereby apply for the issue of a Uganda 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 implications 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*.....

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**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)

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- 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 certificates.