

10. Parent's signature in the case of illegitimate child if the father's particulars are to be entered in the register	(to be filled only in case of illegitimate birth) Father's Mother's
--	---

I do hereby declare the above to be a true and correct statement.

Witness my hand at thisday of20...

Signature of Declarant

Signature

To be initialled and dated

by declarant

Tel. No.

Subscribed in the presence of :-

1st Witness

2nd Witness

Full name:

Full name:

Residence:

Residence:

Signature:

Signature:

DECLARATION OF BIRTH AFTER THREE MONTHS (Section 24)
(To be forwarded by the Declarant direct to the Registrar of the Division in which the birth occurred)

Whereas the birth of the child herein named has not been registered within three months and it is now necessary to register the same, I

.....of

.....

hereby declare that the following particulars to be registered concerning its birth and name are true and correct to the best of my knowledge and belief.

1 Date and place of birth Registration Division and District	
2. Name	
3. Sex	
4. Father's full name date of birth place of birth race rank or profession	
5. Mother's full name (Maiden) date of birth place of birth race address age	
6. Were parents married?	
7. If grandfather was born in Sri Lanka his full name his year of birth his place of birth	
8. If the father was not born in Sri Lanka and if great grand- father was born in Sri Lanka his full name his year of birth his place of birth	

9. Declarant's full name, residence (address), and in what capacity he gives information.		
10. Parents' signatures in the case of illegitimate child if the father's particulars are to be in the registration	Father's	
	Mother's	

.....
Informant's signature

<i>Signature</i>

To be signed and dated by Declarant

Tel. No.....

For Office Use Only

Declared before me at this day of20.....

.....
Assistant Registrar – General/
Additional District Registrar/
Justice of the Peace or
Commissioner for Oaths.

Order

The Registrar of Births of Division in the District is hereby ordered to register the birth of which particulars are given in this declaration.

.....
Addl. District Registrar /Registrar General

District Registrar's Office/ Registrar – General's Office

.....

No. and date of the registration (to be filled in by the Registrar)

Declaration of Sri Lankan parent/s of a child born outside Sri Lanka

- (1) I being the applicant* / a parent* of a minor child hereby apply for a certificate of citizenship for myself / my child aforementioned* in terms of Section 6A of the Act.
- (2) I hereby declare that I am* / my child aforementioned* is a citizen of Sri Lanka by virtue of the provisions of Section 5 of the Act.
- (3) I set out below particulars relating to myself* / my child aforementioned*. (details of the child to be registered)
- (a) Full Name :
 - (b) Address :
 - (c) Sex : Male / Female :
 - (d) Date of Birth :
 - (e) Place of Birth :
 - (f) If born outside Sri Lanka,
Place of registration of birth :
 - (g) Particulars of parents :

Father
 Name:
 Whether citizen of Sri Lanka:
 NIC No. (if any):
 Residential Address:

Mother
 Name
 Whether citizen of Sri Lanka:
 NIC No. (if any):
 Residential Address:

.....

.....

Tel. No.

Tel. No

DECLARATION

- (4) I declare that I am not*/ my child aforementioned* is not a citizen of any other country
- I do solemnly, sincerely and truly declare and affirm / swear that the foregoing particulars are to the best of my knowledge true.

.....
 Signature of Applicant

Date :

FOR OFFICE USE ONLY

Affirmed / sworn at thisday of20..... before me.

.....
 Signature of Justice of the Peace
 Or Commissioner of Oaths

Name and address of the Justice
 of the Peace or Commissioner of Oaths :

FOR CHILDREN OVER ONE (01) YEAR

(Address)

.....
.....
.....
.....

H. E. the High Commissioner
High Commission of Sri Lanka
13, Hyde Park Gardens
London W2 2LU
United Kingdom.

Date:

Dear Sir or Madam

Reason for Non Registration of Birth of a child born outside Sri Lanka within one (01) year

I/We, the parent/s of Master/Miss

..... born in

(Country of Birth)

onhereby declare that I/we did not register the birth of my/our
(Date of Birth)

above named son/daughter within one year of his/her birth due to the following reason/s.

.....
.....
.....

Therefore, I/we shall be pleased if you could register the above birth now and issue a Birth Certificate.

Thanking you,

Yours faithfully

Sign:
Name:.....
Passport No:.....
(Father)

Sign:
Name:
Passport No:
(Mother)

**AFFIDAVIT RELATING TO PATERNITY AND
DECLARATION OF CITIZENSHIP**

I holder of Sri Lankan
Passport bearing No:issued aton
presently residing at

..... do hereby sincerely, solemnly and truly, affirm and declare as follows:

- (1) I am the declarant above named.
- (2) I admit the paternity of the child
..... born on at
and registered under the birth registration No:
who was born to Miss.
.....prior to the registration of our marriage.
- (3) I have legitimated the birth of my child above named by my subsequent
marriage to the mother of the child which was registered at the Registrar of
Marriages Office at on under
Registration No:
- (4) I also declare that I was a citizen of Sri Lanka as at
the date of birth of my child and continues to be a Citizen of Sri Lanka.

.....
Declaration / Affirmant

before me

.....
Justice of peace
Commissioner of Oaths

FOR PERMANENT RESIDENTS/INDEFINITE LEAVE TO REMAIN VISA

HOLDERS ONLY

PLEASE FILL IN BLOCK CAPITALS AND FAX/POST DIRECT TO THE ADDRESS BELOW
(The reply received by you from the Home Office, Liverpool should be attached to the application)

Nationality Enquiry Team
Immigration & Nationality Directorate
Home Office
P.O. Box 306, Liverpool
L69 2UX

Tel: 0845 010 5200
Fax: 0151 672 5592 /02081963248

Dear Sirs,

Please be good enough to inform me as early as possible to my address given below whether I have been granted British Citizenship either by naturalization or by registration. I urgently need the above confirmation in order to renew my Sri Lankan passport / to obtain a new Sri Lankan passport / to register my child's Birth in Sri Lanka.

Forenames

Surname

Name at Birth / Maiden Name

Address:

.....

Date of Birth: Place of Birth – (Town/Country)

Sri Lankan Passport No:

Visa No.

Any other Ref:

Yours Faithfully

.....

(Signature)

I also declare that I am a citizen of Sri Lanka and have not acquired citizenship of the United Kingdom or any other country either by naturalization or by registration.

Date:

(Signature)

CONSENT OF THE FATHER /MOTHER FOR THE INCLUSION OF NAME OF THE CHILD IN EITHER MOTHER’S OR FATHER’S PASSPORT

Address:.....

.....

.....

Post Code :

Tel. No. :.....

I,..... father/mother of
Master/Miss residing at
the above address do hereby give my consent to include my son’s/daughter’s name
on my wife’s/husband’s (Mrs./Mr
..... passport.

Father or Mother’s Signature :

Name :

Date :

**CONSENT OF THE PARENTS
TO ISSUE A SEPARATE PASSPORT FOR THE CHILD**

Address

.....

.....

Post Code

Tel:

I/We,

.....

parent/parents of Master/Miss

.....

residing at the above address do hereby give my/our consent to issue a separate passport for my/our child.

Father

Mother

Signature :

Signature:

Name:

Name:

Passport No:

Passport No.:

Date:

Date:

APPLICATION FOR A SRI LANKAN TRAVEL DOCUMENT

ISSUED FREE

Affix the third photograph here

INSTRUCTIONS ON HOW TO FILL THE APPLICATION ARE GIVEN IN PAGE TWO ABOVE

(01) Present travel document number	<input type="text"/>	FOR OFFICE USE ONLY								
(02) Personal identity card number	<input type="text"/>	<input type="text"/>								
(03) Type of travel document required	All Countries Specified (Middle East) Countries Emergency Certificate Identity Certificate	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>AC</td><td><input type="checkbox"/></td></tr> <tr><td>ME</td><td><input type="checkbox"/></td></tr> <tr><td>EC</td><td><input type="checkbox"/></td></tr> <tr><td>IC</td><td><input type="checkbox"/></td></tr> </table>	AC	<input type="checkbox"/>	ME	<input type="checkbox"/>	EC	<input type="checkbox"/>	IC	<input type="checkbox"/>
AC	<input type="checkbox"/>									
ME	<input type="checkbox"/>									
EC	<input type="checkbox"/>									
IC	<input type="checkbox"/>									
(04) Surname	<input type="text"/>									
(05) Names other than surname	<input type="text"/>									
(06) Civil status	Single <input type="checkbox"/> S Married <input type="checkbox"/> M Divorced <input type="checkbox"/> D Widowed <input type="checkbox"/> W									
(07) Sex	Male <input type="checkbox"/> M Female <input type="checkbox"/> F									
(08) Maiden name	<input type="text"/>									
(09) Permanent address in the country of domicile	<input type="text"/>									
10) Profession/Occupation	<input type="text"/>									
(11) Skin complexion	Black <input type="checkbox"/> B Dark <input type="checkbox"/> D Fair <input type="checkbox"/> F White <input type="checkbox"/> W	(12) Colour of eyes <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Black</td><td><input type="checkbox"/> 1</td></tr> <tr><td>Blue</td><td><input type="checkbox"/> 2</td></tr> <tr><td>Brown</td><td><input type="checkbox"/> 3</td></tr> <tr><td>Yellow</td><td><input type="checkbox"/> 4</td></tr> </table>	Black	<input type="checkbox"/> 1	Blue	<input type="checkbox"/> 2	Brown	<input type="checkbox"/> 3	Yellow	<input type="checkbox"/> 4
Black	<input type="checkbox"/> 1									
Blue	<input type="checkbox"/> 2									
Brown	<input type="checkbox"/> 3									
Yellow	<input type="checkbox"/> 4									
(13) Colour of hair	Black <input type="checkbox"/> 1 Blue <input type="checkbox"/> 2 Grey <input type="checkbox"/> 3	(14) Height in centimeters <input type="text"/>								
(15) Marks of identification (if any)	<input type="text"/>									
(16) Date of birth	Day <input type="text"/> <input type="text"/>	Month <input type="text"/> <input type="text"/>								
		Year <input type="text"/> <input type="text"/>								
(17) Birth certificate no. and the district	<input type="text"/>									
(18) Place of birth	<input type="text"/>									
(19) Have you obtained citizenship of a foreign country or dual citizenship in Sri Lanka	Yes <input type="checkbox"/> No <input type="checkbox"/>									
(20) Number of children under 16 years of age to be included as per form IM 35 C (Maximum six)	<input type="text"/>									
(21) Passport required on	Same day service <input type="checkbox"/> S Normal service <input type="checkbox"/> N	<input type="text"/>								

Signature of the applicant

DECLARATION OF THE APPLICANT

I declare that/ I am a citizen of Sri Lanka/ I hold Dual Citizenship of Sri Lanka/ I am a citizen of (write the name of the country).*

I declare that the information furnished in this application is true and correct to the best of my knowledge and belief.

I certify that all previous Passports, Emergency Certificates and Identity Certificates held by me have been surrendered to the Sri Lankan Passport Authorities for cancellation, other than the Passport/Emergency Certificate/Identity Certificate No. which is now submitted and that I have made no other application since the one attached was issued to me. *

I certify that I have not previously held or applied for any Passport, Emergency Certificate or an Identity Certificate. *

I certify that affixed photographs are depicting the natural status of myself without disguise or concealment and were taken within the last three months.

I certify that the documents attached to this application are true and correct and no alternations, modifications or falsifications were carried out to them to hide or deflect true facts.

Date:

.....

Signature of the applicant

* Please delete inapplicable words.

CERTIFICATE REGARDING THE APPLICANT (NO FEE IS CHARGEABLE FOR THIS CERTIFICATE)

I of
... hereby certify that I have personally known the applicant
..... for a period of
years and I can, from my personal knowledge of the applicant, vouch for the applicant as a suitable person to receive a Sri Lankan travel document.

To the best of my personal knowledge and belief, the information given by the applicant is true and the declaration made above by the applicant is accurate.

The applicant placed his/her usual signature before me on at

Designation or profession:

.....
Signature of the attester

Seal/Stamp/Frank

Please Note:

- (1) Persons signing this certificate of attestation should note that they can sign only on the personal knowledge about the applicant.
- (2) The above certification could be given only by a Civil List Officer of the Sri Lankan Government, Justice of the Peace, Qualified Medical Practitioner or by an Attorney at Law.

ISSUED FREE

IM 35 (B)

DEPARTMENT OF IMMIGRATION AND EMIGRATION

For Office Use only

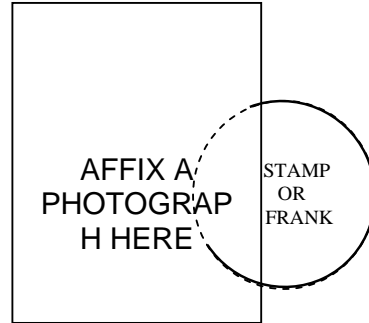
PHOTO/SIGNATURE CARD

CA			
----	--	--	--

Please affix two colour photographs of size 3.5 cm x 4.5 cm (without white border) in the spaces below. Do not write or mark anything on the photograph to be scanned.



PHOTOGRAPH TO BE SCANNED



VERIFICATION PHOTOGRAPH

Please place your signature inside both cages below. Signature should not touch the border.

I certify that the above photograph of is depicting the natural status of the applicant without disguise or concealment and that the above signature is placed by the applicant before me. I have signed over the verification photograph and placed my frank/stamp across the same photograph in confirming this fact.

Date :

.....
Signature of the attester

FOR OFFICE USE ONLY				
Approved	Fee collected	Amount	Receipt number	Passport type
Scanned	Printed	QA		