

THE REPUBLIC OF UGANDA

APPLICATION FOR A UGANDA TRAVEL DOCUMENT

(Please read notes on the second page before completing the form)

Oro	dinary Official Diplomatic		
File Reference No.		PLEASE PASTE	
1.	THE APPLICANT:	DO NOT STAPLE	
	Surname	THE PHOTO SHOULD	
	Other Names	HAVE A WHITE	
	Sex	BACKGROUND	
	Place and Date of Birth		
	Profession		
	Address		
	Telephone Number		
2.	CITIZEN OF UGANDA By descent; by birth; by registration; by naturalization (Delete word)	ls which do not apply)	
3.	MARRIED WOMEN: Maiden Names		
	Husband's Full Names		
	Date and place of marriage		
_			
4.	DECLARATION:		
	 I, the undersigned, hereby apply for the issue of a Uganda passport and declare a. that the information given in this application is correct to the best of my kr b. that I have not lost that status of citizen of Uganda; c. that I have not previously held or applied for a travel document of any dest d. that all previous travel documents granted to me have been surrendered of No	nowledge and belief; cription; her than travel document .which is lost/destroyed the attached was issued.	
	Specimen Signature	Date	

5. RECOMMENDER: I certify that the applicant is personally known to me and to the best of my knowledge and belief, the facts stated on this form are correct. I am a citizen of Uganda.		
Full names		
Profession Address		
Phone Signature		
Notes:		
1. How to complete the form		
Section 1, 2, 4 and 5 of this form must be completed by all applicants for new Passports.		
2. Authentication of application		
The application must be authenticated and sponsored in section 5 by a citizen of Uganda of some standing.		
3. Photographs (4)		
The copies of recent photographs of the applicant must be included with the application. These photographs must be taken full face without hat, veil and must not be mounted. The photographs must be printed on normal thin photographic paper and must not be glazed on the reverse side. The recommender is also required to endorse the reverse side of one of the photographs with the words:		
"I certify that this is a true likeness of the applicant Mr./Mrs./Miss and add his or her signature.		
PARENTS' BIOGRAPHICAL INFORMATION		
Father's Name		
Father's Place of Birth		
Father's Date of Birth		
Mother's Name		
Mother's Place of Birth		
Mother's Date of Birth		

Submit Application to:
The Consular Officer
Embassy of the Republic of Uganda
5911 16th Street NW
Washington DC 20011