

Ministry of Foreign affairs of the Islamic Republic of Afghanistan

Consulate General of Afghanistan – Vancouver

7825 Edmonds Street Burnaby, BC V3N 1B9 Tel:+1

604-553-3159/ Fax: +1 604-553-4726

consular.vancouver@mfa.af

<https://www.vancouver.mfa.af/>



BIRTH CERTIFICATE REQUEST FORM

1.Introduction of the Applicant	
Title:	Surname:
Given Name(s):	Previous Name(s):
Date of Birth:	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Father's Name:	Father's Date of Birth:
Grand Father's Name:	Mother's Name:
2.Place of Birth	
Country:	Province:
District/Town:	Village:
3.Place of Domicile in Afghanistan	
Province:	District/Town:
Village:	Duration of Domicile:
4.Nationality	
First Nationality:	Second Nationality:
Date of Obtaining Second Nationality:	Other Nationality(ies):
Have you ever applied to rescind your Afghan Nationality YES <input type="checkbox"/> NO <input type="checkbox"/> (If YES, please provide the following information.)	
Date of Application: YYYY/MM/DD	Place of Application:
Result (please explain):	
Have you ever been issued an Afghan Passport? YES <input type="checkbox"/> NO <input type="checkbox"/> (If YES, please provide the following information.)	
Date of Issue: YYYY/MM/DD	Is your passport enclosed? YES <input type="checkbox"/> NO <input type="checkbox"/>
Place of Issue:	
5.Current Residency and Legal Status	
Country of Residence:	City of Residence:
Legal Status: Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Landed Immigrant Refugee <input type="checkbox"/> Asylum See <input type="checkbox"/> Other explain <input type="checkbox"/>	
Do you have documents verifying your residential status? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you enclosed a certified copy of the document with your application? YES <input type="checkbox"/> NO <input type="checkbox"/>	
6.Current Address and Contact Details:	
Home Address:	
City/Town:	Postal Code:
Mobile Phone:	Home Phone:
Office Phone:	Email:
7. Documents and Guarantees	
Do you have documents verifying your Afghan identity? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, please provide the following information)	

Legal Status:
 Tazkira Passport Birth Certificate Marriage Certificate Education/Professional ID
 Other (explain)
 Note: This document must be enclosed with your application in original form.

In absence of any documents, have you enclosed two identity guarantee forms? Yes No
 (If yes, please provide the following information)

First Guarantor:

Full Name:	City of Residence
Contact Number:	Guarantee form completed and signed? Yes <input type="checkbox"/> No <input type="checkbox"/>

Second Guarantor:

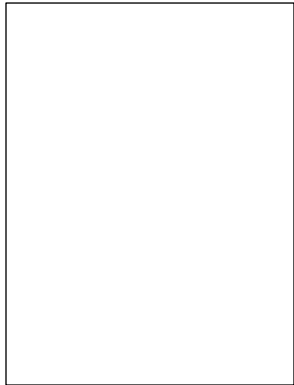

Full Name:	City of Residence
Contact Number:	Guarantee form completed and signed? Yes <input type="checkbox"/> No <input type="checkbox"/>

8. Payment:

Application for this service is 55.00 USD. This amount is payable to :
 " The Consulate General of I.R of Afghanistan in Vancouver - Canada"

If you would like to receive your document by mail, please send a registered return envelop with in Canada.

9. Photo, Declaration and Signature

	Back of Photo Signed by a guarantor: I certify that this is a true likeness of: Applicant's Name	I, _____, solemnly declare that The statements and information I have provided on this form are correct to the best of my knowledge. In case of false information, I take full responsibility for consequences. Signature (please sing inside the box):  Date: YYYY/MM/DD
--	---	---

To be Used by Consular Office Only

Verification of Identity: <input type="checkbox"/>	Documentation Provided <input type="checkbox"/>	Guarantee Forms submitted <input type="checkbox"/>
--	---	--

Total amount received (including bank charges):

Birth Certificate Issued? YES NO
 If Birth Certificate NOT Issued: (explain reasons)

Application Refused
 Application incomplete

Consul's Signature	Head of Mission's Signature
--------------------	-----------------------------