****

**KENYA HIGH COMMISSION**

**PLOT 3 UPPER KOLO TERRACE, P.O. Box 5220, Kampala, UGANDA**

**Tel. +256 414 258235**

**CITIZEN REGISTRATION FORM**

***(To be completed in block letters)***

**PERSONAL PARTICULARS**

SURNAME: ……………………………… OTHER NAMES:……………………..…………..

PASSPORT NO: ………………………… FILE REF NO:……………………….…………….

ISSUED ON:…………………………… EXPIRY DATE:……………………...…………….

ID NO: ……………………………. …. PROFESSION:…………………….…………........

MARITAL STATUS:…………………… HOME COUNTY : ………………………….........

HOME COUNTY ADDRESS : ……………………………………..…………………………………

………………………………………………………………………………………………......

PHYSICAL ADDRESS IN UGANDA: …………………………..………………………………….

…………………………………………………………………………………………………………..

TEL/MOB:.................................................. EMAIL:……………………………………………..

**NEXT OF KIN PARTICULARS**

SURNAME:……………………………... …… OTHER NAMES:…………………………………

RELATIONSHIP:…………………………….. CONTACT ADDRESS:……………………………

……………………………………………………………………………………………………………

TEL:………………………………………. EMAIL:……………………………………….................

I certify that the information given above is true to the best of my knowledge.

SIGNATURE:………………………………………DATE:………………………………………….

**FOR OFFICIAL USE ONLY**

**REG. NO: ………..……………………………………………………………………………………**

**COMMENTS…………………………………………………………………………………..…………………………………………………………………………………………………………………… …………………………………………………………………………………………………………… ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**