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THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HOME AFFAIRS NATIONAL IDENTIFICATION AUTHORITY

BATCH DATE: D

BATCH NUMBER: POSTCODE:

VILLAGE / MTAA / SHEHIA:

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ENROLLMENT STATION:

IDENTIFICATION FORM (THIS FORM MUST BE FILLED IN BY LEGAL RESIDENTS/ REFUGEES)																							
Put a Tick Mark () in the relevant box LEGAL RES														REFU	GEE]						
A: PERSONAL DETAILS:																							
1. FIRST NAME																							
2. MIDDLE NAME																							
3. SURNAME																							
4. OTHER NAMES																							
5. DATE OF BIRTH	D	D		М	М		Y	Υ	Υ	Υ													
6. PLACE OF BIRTH																							
7. NATIONALITY																							
8. PHONE NUMBER																							
9. GENDER MALE					FEMAL	.E																	
10. MARITAL STATUS:	0. MARITAL STATUS: SINGLE			SINGLE MARK					W	IDOW/	WIDO	NER			DIVOR	CED							
11. OCCUPATION:	11. OCCUPATION: EMPLOYEED			LOYEED SELF EMPLOYEED UNEMPLOYEED																			
								B: PA	RENTS	/ GUA	RDIAN	I DETA	ILS:										
12. FATHER'S FIRST NAME																							
13. FATHER'S MIDDLE NAME																							
14. FATHER'S LAST NAME																							
15. MOTHER'S FIRST NAME																							
16. MOTHER'S MIDDLE NAME																							
17. MOTHER'S LAST NAME																							
C: RESIDENTIAL ADDRESS IN TANZANIA:																							
18. HOUSE NUMBER																							
19. REGION																							
20. DISTRICT																							
21. WARD																							
22. VILLAGE / MTAA / SHEHIA																							
23. STREET/ KITONGOJI																							
24. POSTAL ADDRESS																							
25. POSTCODE																							

D: APPLICANT'S PERMANENT ADDRESS:																								
26. COUNTRY																								
27. ADDRESS LINE 1:																								
28. ADDRESS LINE 2:																								
29. ADDRESS LINE 3:																								
30. ADDRESS LINE 4:																								
31. ADDRESS LINE 5:																								
E: PERSONAL REFERENCES (Tick (✓) if Attached																								
32. PASSPORT NUMBER									L												32.			
33. PASSPORT EXPIRY DATE										D	D		М	М		Y	Υ	Y	Y				٦	
34. RESIDENT PERMIT / EXEMPTION CERTIFICATE / DEPENDANT PASS NUMBER																					34.			
35. RESIDENT PERMIT / EXEMPTION CERTIFICATE / DEPENDANT PASS EXPIRY DATE										D	D		М	М		Y	Υ	Y	Y				٦	
36. WORK / AUTHORITY PERMIT NUMBER																					36.			
37. WORK / AUTHORITY PERMIT EXPIRY DATE										D	D		М	М	L	Y	Y	Y	Y				7	
38. REFUGEE ID CARD NO / RATION CAR											_								.,		38.			
39. REFUGEE ID CARD NO / RATION CAI										D	D		М	М		Y	Y	Y	Y				٦	
40. CONVETION TRAVEL DOC NO / CERT																					40.			
41. CONVETION TRAVEL DOC NO / CERT	RTIFICAT	E OF ID	ENTITY	EXPIRY	DATE.					D	D		М	М		Y	Υ	Y	Y					
F: APPLICANT'S DECLARATION																								
I verify that all the informatio	on I ha	ve giv	en ab	ove is	corre	ect an	d true	to th	ie bes	t of n	ny kr	owled	ge ar	id be	ief.									
42. APPLICANT'S SIGNATURE											43. LGA OFFICER'S NAME AND SIGNATURE .													
APPLICANT'S SIGNATURE											43. LGA OFFICER'S NAME AND SIGNATURE. LGA OFFICER'S NAME AND SIGNATURE													
DATE	D		М	М		Y	Y	Y	Y		DATE D D M M Y Y Y Y											Y		
G: FOR OFFICIAL USE ONLY.																								
44. CENTER NUMBER											45. REGION													
46. DISTRICT																								
47. WARD																								
48. CENTER NAME																								
49. APPLICATION DATE		D	D		М	М	1	Υ	Y	Υ	Y								1					
50. REGISTRATION OFFICER'S NAME																								
51. IMIMIGRATION OFFICER'S NAME AN	ND SIGN	ATURE	52. RI	TA / RG	O OFFI	CER'S N	NAME A	ND SIG	INATUR	RE 53.	WEO	/ EMPLO	YER'S I	NAME A	AND SIG	NATUR	E 54	4. NIDA	OFFICE	R'S NA	ME AN) SIGNA	ATURE	