



1. Introduction	
Title	Surname
Given Name(s)	Previous Names (if any)
Date of Birth (DD/MM/YY)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Father's Name	Father's Date of Birth (DD/MM/YY)
Grand Father's Name	Mother's Name
2. Nationality	
First Nationality	Second Nationality (if applicable)
Date of Obtaining Second Nationality	Other Nationality(ies)
Have you ever applied to rescind your Afghan nationality? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please provide the following information)	
Date of Application	Place of Application
Result (please explain)	
3. Current Residency and Legal Status	
Country of Residence	City of Residence
Legal Status: <input type="checkbox"/> Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee <input type="checkbox"/> Asylum seeker <input type="checkbox"/> Other (please explain	
Do you have documents verifying your residential status? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please provide the following information)	
Document Type	Document Number
Date of Issue	Validity Expiry
Have you enclosed a certified copy of the document with your application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Family	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower	
Spouse's Name	Spouse's Date of Birth
Spouse's Nationality	Spouse's Place of Residence
5. Current Address & Contact Details	
Country	Province/City
Address	Postal Code
Mobile Phone	Office Phone
Home Phone	Email Address
6. Employment Details	
Present Occupation	Employer
Work Address	Employer's Contact No.

7. Details of Required Passport Extension	
Passport Type	Passport No.
Date of Issue/Extension	Date of Expiry
Place of Issue	Is your passport enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Extend for: <input type="checkbox"/> One Year <input type="checkbox"/> Two Years <input type="checkbox"/> Three Years <input type="checkbox"/> Four Years <input type="checkbox"/> Five Years	
8. Payment	
Have you enclosed the required passport extension fee? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>(With exception of Diplomatic or Service passport holders, nobody is except from paying fees)</small>	
Please specify the fee amount paid: <input type="checkbox"/> CAD 25 <input type="checkbox"/> CAD 50 <input type="checkbox"/> CAD 75 <input type="checkbox"/> CAD 100 <input type="checkbox"/> CAD 125	
If applicable, please also specify if you have enclosed any of the following payments: <input type="checkbox"/> Return postal cost (CAD 20 for registered return post within Canada)	
Please specify the total amount in CAD included in your Money Order or Bank Cheque: <input type="text"/>	
9. Photo, Declaration & Signature	
<div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto; padding: 5px;">Please affix your photo here</div> <div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto; padding: 5px;">Please affix your photo here</div>	<p>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.</p> <p>Signature (please sign inside the box)</p> <div style="border: 1px solid black; width: 200px; height: 50px; margin: 0 auto;"></div> <p>Date: / /</p>
<p>Note: Two fresh, identical standard passport size photos, taken directly of the face so that both ears are visible.</p>	

For Use By the Consular Office	
Verification of Identity:	<input type="checkbox"/> Documentation provided <input type="checkbox"/> Documentation not provided
Documents verifying current address:	<input type="checkbox"/> Original document seen <input type="checkbox"/> Certified copy received
Total amount received:	
Return postage cost:	<input type="checkbox"/> Return envelop provided <input type="checkbox"/> Return postage cost (CAD) received
Date of extension	Expiry date
Passport Number	Registry Book Serial Number
If not extended: (provide the reason)	
Consul's Signature	Head of Mission's Signature