

Application type:New: Late registration: Adoption: Amendment/correction:

Barcode sticker

**REPUBLIC OF NAMIBIA****MINISTRY OF HOME AFFAIRS AND IMMIGRATION****APPLICATION FOR REGISTRATION OF BIRTH**

(Regulation 2 (iii))

Kindly take notice that penalties for false statements willfully made are the same as those for Perjury

Certificate number/entry number

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Birth number given by Health Authorities

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A: DETAILS OF THE CHILD

Surname: _____

First name(s): _____

Date of birth:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Sex: Male Female Type of birth: Single Twins Triplets Quadruplet **PLACE AND COUNTRY OF BIRTH**

Place of birth: _____ Constituency: _____

Region of birth: _____ Country of birth: _____

B: BIRTH REGISTRATION DETAILSName of health facility where the child was born: _____ Home birth:

Usual place of resident of child (Town): _____

The capacity of person(s) registering: _____

C: DETAILS OF THE BIOLOGICAL FATHER OF THE CHILD

Identity number/entry number/passport number

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Surname: _____

First names: _____

Date of birth:

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Place of birth: _____ Region: _____

Country of birth: _____

Citizenship at the time of child's birth: _____

*If the father is not a Namibian citizen, state whether he is a permanent resident of the Republic of Namibia*YES NO

Permanent resident permit no: _____

Date issued: _____

Usual place of resident of father (Town): _____

Address: _____

Cell no: _____ Home phone: _____

Email address: _____

EDUCATIONAL ATTAINMENT (tick one only):

No formal education	<input type="checkbox"/>
Adult education	<input type="checkbox"/>
Incomplete primary education	<input type="checkbox"/>
Complete primary education	<input type="checkbox"/>
Complete secondary education	<input type="checkbox"/>
Vocational training	<input type="checkbox"/>
Tertiary education	<input type="checkbox"/>

DECLARATION OF PATERNITY:

I hereby declare that I am the biological/adoptive* father of the above-mentioned child, and agree to the first name(s) and surname given:

Signature: _____ Date: _____

*A court order must be attached for adoptive parent(s)

D: DETAILS OF BIOLOGICAL MOTHER OF THE CHILD

Identity number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Surname: _____

First names: _____

Date of birth:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place of birth: _____ Region: _____

Country of birth: _____

Citizenship at the time of child's birth: _____

*If the mother is not a Namibian Citizen, state whether she is a permanent resident of the Republic of Namibia*YES NO

Permanent resident permit no: _____

Date issued: _____

Usual place of resident of mother (Town): _____

Address: _____

Cell no: _____ Home phone: _____

Email address: _____

EDUCATIONAL ATTAINMENT (tick one only):

No formal education	<input type="checkbox"/>
Adult education	<input type="checkbox"/>
Incomplete primary education	<input type="checkbox"/>
Complete primary education	<input type="checkbox"/>
Complete secondary education	<input type="checkbox"/>
Vocational training	<input type="checkbox"/>
Tertiary education	<input type="checkbox"/>

DECLARATION OF MATERNITY:

I hereby declare that I am the biological/adoptive* mother of the above-mentioned child, and agree to the first name(s) and surname given:

Signature: _____ Date: _____

E: MARITAL STATUS OF THE PARENTSAre the parents **indicated under item C and D** legally married to each other?YES NO

Place of marriage: _____ Date of marriage: _____

**A court order must be attached for adoptive parent(s)*

F: CHILDREN IN CARE

In the event that the child is not living with either the biological parents, kindly provide the name and address of caregiver or institution:

Name of caregiver/Institution: _____

Address: _____

Cell: _____

G: DECLARATION OF PERSON REGISTERING THE CHILD

I solemnly declare that the information furnished above is true and correct:

Full name: _____ ID number: _____

Relationship to child: _____

Residential address: _____

Telephonenumber: _____ E-mail: _____

Signature: _____

H: LEFT THUMB PRINT IF APPLICANT IS ABOVE THE AGE OF TWELVE (12) YEARS**I: FOR OFFICIAL USE**

Type of birth certificate issued: Namibian birth certificate: Birth certificate for non-namibians:

I hereby declare that the content of this form has been verified and is correct:

Approved/Not Approved: _____

Name of Registrar: _____ Date: _____

Registration Office: _____

Signature of Registrar: _____

