



**REPUBLIC OF NAMIBIA**

**MINISTRY OF HOME AFFAIRS, IMMIGRATION, SAFETY AND SECURITY**

Enquiries:

Tel: (061) 2922111  
Fax: (061) 292 2185

Private Bag 13200  
WINDHOEK

Our Ref:

Your Ref:

**APPLICATION FOR NAMIBIAN CITIZENSHIP BY NATURALIZATION**

**(NB: QUALIFIED PERIOD: AFTER TEN (10) YEARS (LEGAL RESIDENCE IN NAMIBIA))**

**NOTE:** Incomplete forms and outstanding documents will cause unnecessary delays.  
**All copies must be certified**

**1. TO BE COMPLETED AND SUBMITTED BY THE APPLICANT**

- (a) Copy of Permanent Residence Permit
- (b) Original Police Clearance Certificate of country of origin and Namibian (not older than six month).
- (c) Medical Report
- (d) Radiological Report
- (e) Letter from receiver of revenue confirming period of residence
- (f) Motivation letter from applicant with the Commission of oath
- (g) Two character references (letter from friends who have known you longer than 2 years and must also attach their copies of IDs)
- (h) Job description of yourself and your spouse
- (i) Copy of Namibian identity document if any
- (j) Copy of Birth Certificate



**REPUBLIC OF NAMIBIA**  
**APPLICATION FOR NAMIBIAN CITIZENSHIP**

- DIRECTIVES:**
1. This form must be completed in BLOCK letters
  2. All items must be completed in detail. A mere dash (-) is not acceptable
  3. Failure to complete in detail will cause unnecessary delay

**OFFICIAL USE**

Reg./Nat. Certificate No \_\_\_\_\_  
Date: \_\_\_\_\_  
Initials: \_\_\_\_\_  
Date: \_\_\_\_\_

A. PARTICULARS OF APPLICANT (Indicate by means of a cross, whatever is applicable):

CITIZENSHIP BY: MARRIAGE ☐ DESCENT ☐ NATURALISATION ☐ REGISTRATION ☐

SURNAME		CHRISTIAN NAMES																				
Maiden name (if the applicant is or was a married woman)		Previous Surnames (if the surname of applicant has been changed)																				
Date of Birth _____	Place of birth _____  Town _____  Country _____ (Attach copy of birth certificate)	Sex:  Male <input type="checkbox"/>  Female <input type="checkbox"/>	Marital status:  Single <input type="checkbox"/> Widower <input type="checkbox"/> Divorced <input type="checkbox"/>  Married <input type="checkbox"/> Widow <input type="checkbox"/>																			
Occupation		Identity No. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																				

If born outside Namibia please state:

Present citizenship: \_\_\_\_\_

Residential address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Telephone No \_\_\_\_\_

Postal Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of ordinary residence in Namibia if not born in Namibia: \_\_\_\_\_

Particulars of children under the age of 18 years

Full name and registered surname of each child	Date of Birth	Place (district) of birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Did you acquire citizenship of a country other than Namibia whilst not a minor?

YES ☐ NO ☐

If so, kindly give the following particulars in respect of the first foreign citizenship you acquired:

- (a) Date of acquisition \_\_\_\_\_
- (b) Place of acquisition \_\_\_\_\_

(i) Residence in that country

YES ☐ NO ☐

(ii) **Marriage**

YES ☐ NO ☐

If Yes, state name of spouse:

..... citizenship or nationality of spouse:

..... da te and place of marriage .....

(d) Citizenship acquired by you:

Have you ever been convicted of any crime in any country?

Are you suffering from tuberculosis, any other infections or contagious disease or any mental or physical deficiency?

Particulars if the reply to one or more of the questions is in the affirmative

Was your father or mother at the time of your birth:

(a) enjoying diplomatic immunity in Namibia under any law relating to diplomatic privileges

(b) career representative of another country?

(c) members of any police, military or security unit seconded for service within Namibia by the government of another country

(d) Illegal immigrants

Particulars if the reply to any one of the questions is in the affirmative:

If your father or mother was born outside the Republic of Namibia state date of entry

**B. PARTICULARS OF PARENTS** (to be completed by all applicants):

[illegible]



C. PARTICULARS OF SPOUSE (to be completed only by applicants who apply for citizenship by virtue of marriage):

Are you married to a Namibian Citizen <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">YES</div> <div style="border: 1px solid black; padding: 2px 10px;">NO</div> </div> <div style="margin-top: 20px; font-size: small;">                 (Attach copy of marriage certificate)             </div>	Date and place of marriage ..... ..... ..... .....	Identity No. of spouse <div style="border: 1px solid black; height: 25px; width: 100%; display: flex; margin-top: 5px;"> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> <div style="flex: 1;"></div> </div>
Surname		Christian names
Citizen by:  <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">                         Birth <div style="border: 1px solid black; width: 40px; height: 25px; display: inline-block; margin-top: 5px;"></div> </div> <div style="text-align: center;">                         Descent <div style="border: 1px solid black; width: 40px; height: 25px; display: inline-block; margin-top: 5px;"></div> </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">                         Registration <div style="border: 1px solid black; width: 40px; height: 25px; display: inline-block; margin-top: 5px;"></div> </div> <div style="text-align: center;">                         Naturalisation <div style="border: 1px solid black; width: 40px; height: 25px; display: inline-block; margin-top: 5px;"></div> </div> </div>		Place and Date of Birth Date: ..... Town: ..... Country: ..... (Copy of birth certificate)

D. DECLARATION

I solemnly declare that the above particulars given by me are true in substance and in fact and that I fully understand the meaning thereof

Signature: .....

Date: .....

Before administering the prescribed oath/solemn declaration, I put the following question to the deponent and noted his/her reply in his/her presence:

(a) Do you know and understand the contents of the above declaration?

Reply: .....

(b) Have you any objection to make in the prescribed oath?

Reply: .....

(c) Do you regard the prescribed oath as binding on your conscience?

Reply: .....

The deponent has acknowledged that he/she knows and understands the contents of the declaration. The declaration was duly sworn to/solemnly affirmed before me and the deponent's signature/thumb print/mark was appended thereon in my presence

Date: .....

Signature: .....

Commissioner of Oaths

Place: .....

Designation (Rank)

Christian Names and Surname

Address: .....

This form is exempted from stamp duty