



BATCH NUMBER:

POSTCODE:

VILLAGE / MTAA / SHEHIA:

ENROLLMENT STATION:

BATCH DATE:

Grid for batch date: D D M M Y Y Y Y

THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HOME AFFAIRS
NATIONAL IDENTIFICATION AUTHORITY

2A

IDENTIFICATION FORM

(THIS FORM MUST BE FILLED IN BY LEGAL RESIDENTS / REFUGEES WITH BLACK INK)

Put a Tick Mark (✓) in the relevant box

LEGAL RESIDENT

REFUGEE

A: PERSONAL DETAILS:

1. FIRST NAME

Grid for first name

2. MIDDLE NAME

Grid for middle name

3. SURNAME

Grid for surname

4. OTHER NAMES

Grid for other names

5. DATE OF BIRTH

Grid for date of birth: D D M M Y Y

6. PLACE OF BIRTH

Grid for place of birth

7. COUNTRY OF BIRTH

Grid for country of birth

8. NATIONALITY

Grid for nationality

9. PHONE NUMBER

Grid for phone number

10. GENDER

MALE FEMALE

11. MARITAL STATUS:

SINGLE MARRIED WIDOW / WIDOWER DIVORCED

12. OCCUPATION:

EMPLOYED SELF EMPLOYED UNEMPLOYED

B: PARENTS / GUARDIAN DETAILS:

13. FATHER'S FIRST NAME

Grid for father's first name

14. FATHER'S MIDDLE NAME

Grid for father's middle name

15. FATHER'S LAST NAME

Grid for father's last name

16. MOTHER'S FIRST NAME

Grid for mother's first name

17. MOTHER'S MIDDLE NAME

Grid for mother's middle name

18. MOTHER'S LAST NAME

Grid for mother's last name

C: RESIDENTIAL ADDRESS IN TANZANIA:

19. HOUSE NUMBER

Grid for house number

20. REGION

Grid for region

21. DISTRICT

Grid for district

22. WARD

Grid for ward

23. VILLAGE / MTAA / SHEHIA

Grid for village / Mtaa / Shehia

24. STREET / KITONGOJI

Grid for street / Kitongoji

25. POSTAL ADDRESS

Grid for postal address

26. POSTCODE

Grid for postcode

D: APPLICANT'S PERMANENT ADDRESS:

27. COUNTRY																				
28. ADDRESS LINE 1:																				
29. ADDRESS LINE 2:																				
30. ADDRESS LINE 3:																				
31. ADDRESS LINE 4:																				
32. ADDRESS LINE 5:																				

E: PERSONAL REFERENCES

(Tick (✓) if Attached)

33. PASSPORT NUMBER										33.	<input type="checkbox"/>
34. PASSPORT EXPIRY DATE	D	D	M	M	Y	Y	Y	Y			
35. RESIDENT PERMIT / EXEMPTION CERTIFICATE / DEPENDANT PASS NUMBER									35.	<input type="checkbox"/>	
36. RESIDENT PERMIT / EXEMPTION CERTIFICATE / DEPENDANT PASS EXPIRY DATE	D	D	M	M	Y	Y	Y	Y			
37. WORK / AUTHORITY PERMIT NUMBER									37.	<input type="checkbox"/>	
38. WORK / AUTHORITY PERMIT EXPIRY DATE	D	D	M	M	Y	Y	Y	Y			
39. REFUGEE ID CARD NO / RATION CARD NO.									39.	<input type="checkbox"/>	
40. REFUGEE ID CARD NO / RATION CARD EXPIRY DATE	D	D	M	M	Y	Y	Y	Y			
41. CONVENTION TRAVEL DOC NO / CERTIFICATE OF IDENTITY NO.									41.	<input type="checkbox"/>	
42. CONVENTION TRAVEL DOC NO / CERTIFICATE OF IDENTITY EXPIRY DATE	D	D	M	M	Y	Y	Y	Y			

F: APPLICANT'S DECLARATION

I verify that all the information I have given above is correct and true to the best of my knowledge and belief.

<p>43. APPLICANT'S SIGNATURE</p> <p style="text-align: right;">DATE</p> <p>D D M M Y Y Y Y</p>	<p>44. LGA OFFICER'S NAME AND SIGNATURE.</p> <p style="text-align: right;">DATE</p> <p>D D M M Y Y Y Y</p>
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G: FOR OFFICIAL USE ONLY.

45. CENTER NUMBER										46. REGION							
47. DISTRICT																	
48. WARD																	
49. CENTER NAME																	
50. APPLICATION DATE	D	D	M	M	Y	Y	Y	Y									
51. REGISTRATION OFFICER'S NAME																	

52. IMIMGRATION OFFICER'S NAME AND SIGNATURE	53. RITA / RGO OFFICER'S NAME AND SIGNATURE	54. WEO / EMPLOYER'S NAME AND SIGNATURE	55. NIDA OFFICER'S NAME AND SIGNATURE