

SEYCHELLES NATIONAL IDENTITY CARD

(S.5.Act:10/95)

APPLICATION FORM (NEW/RENEWAL)

PLEASE WRITE IN PRINTED FORMAT	DATE: _____	SERIAL NO. _____
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1. Present Surname: _____
2. Other Names: _____
3. Maiden Surname: _____
4. Date of Birth: ____/____/____ Sex: M / F District: _____
5. Place of Birth Registration: _____ Nationality: _____
6. Mother's Maiden Surname: _____
7. Mother's First Names: _____
8. Date Arrived in Seychelles: ____/____/____ (IF APPLICABLE)
9. a) Residential Address: _____ (*Seychelles Address*)
10. b) Employment Address: _____ (*Seychelles Address*)
11. Telephone Number: _____

Signature of Applicant: _____

For Official Use Only

(Print D.P/G.O.P. 'Plus' Overleaf if possible)

N.I.N:

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Status: _____

Remarks: _____

Collection Date: ____/____/____. Registration Officer: _____

Application Check by: _____ ID.Card Check by: _____

N.I.N

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Delivered to: Mr/Mrs/Ms: _____

Signature: _____ Date: ____/____/____

RENEWAL APPLICATION FEE PAID: SR ____ Cr No: _____ Date: ____/____/____

Note: 1. 9(a) STATEMENT PERMANENT RESIDENCE.

2. Application for new N.I.N must be supported by Birth Certificate, Passport, GOP, D.P, certificate of Registration or Naturalization, Residence permit-as may be requested by the Registration Officer.