

Practice Application for Citizenship Certificate

Please print in ink or type.

I want service in ☐ English ☐ French Please cross (X) one.

Applicant Information

Name (exactly as it is shown on my birth certificate or previous certificate)

Last name

Given name(s)

List any other names (include birth name, maiden name, previous married name(s) aliases and nicknames). These names will not appear on your citizenship certificate

Last name

Given name(s)

Birth details as shown on my birth certificate or previous certificate

Day

Month

Year

Place and country of birth

Personal InformationSex (Cross one.) ☐ Male ☐ FemaleHeight cm OR ft inColour of eyes Marital Status (Cross one.) ☐ Single ☐ Married ☐ Common-law ☐ Widowed ☐ Divorced ☐ Separated**Other Nationalities**Are you a citizen of one or more countries other than Canada? If yes, list the country or countries:

Address and Phone numbers

Home number: () Cell: () Home address:

Disclaimer and Signature

*I declare that the information provided is true, correct and complete. I understand that if I make a false declaration. Or fail to disclose all information material to my application, my citizenship certificate could be taken away and I could be charged under the Citizenship Act.*Signature of applicant: Date: