



CONSULAR SECTION
OF THE
REPUBLIC OF ANGOLA
BRUSSELS –BELGIUM

CONSULAR REGISTRATION

Full name

Age..... years old, Date of birth

Marital status

Place of birth

Province of

Father's name

Father's birthplace

Nationality

Mother's name

Mother's birthplace

Nationality

Applicant's current profession

Working place

Full address

Tel. no.

Full name of spouse:

Spouse's profession

Working place

What was your address in Angola?

When did you arrive?

Why have you settled in this address?

Do you intend to go back to Angola?

with what purpose (a)?

when? refer full name, address and type of a close relative (mention type of relationship)

who lives in Angola

Want a certificate: - please mention the purpose:

(a) Permanent return, holidays, visit a relative, business, tourism.

Brussels....., 20....

THE APPLICANT

DO NOT WRITE OUTSIDE SPACES