



REPUBLIC OF NAMIBIA
Ministry of Home Affairs and Immigration
**APPLICATION FOR A
PERMANENT RESIDENCE PERMIT**

FOR OFFICIAL USE ONLY

Interviewed by _____
on _____
APPROVED: Signature _____
Date _____
Previous correspondence _____

DIRECTIVES

- (a) This form must be completed in **BLOCK** letters.
(b) Please read and comply with the instructions on page 4.
(c) Read all items carefully and complete them in detail.
A mere dash (-) is not acceptable.

- (d) The completed form **MUST** be accompanied by the documents listed on page 4.
(e) In the case of married couples both the husband and the wife must sign and date this form.

1. PARTICULARS OF APPLICANT (indicate by means of a cross, whatever is applicable)

SURNAME:		FIRST NAMES:	
Maiden name (if the applicant is or was a married woman)		Previous surname (if the surname of applicant has been changed)	
Date of Birth:	Place of Birth Country:	Place of Birth Town/City:	
Present Nationality:	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>		
Marital Status: Never Married <input type="checkbox"/> Married <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/>			
Highest educational and vocational qualifications (or number of years of schooling completed successfully):			
Religion:	For official use - Permit Numbers		
Denomination of your Church			

2. PRESENT RESIDENTIAL ADDRESS (Number, Street, Suburb and Town/City)

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- (a) Details: (i) Wife: (ii) Husband if the wife is the applicant: (iii) unmarried children under the age of 21 of both husband and wife including those born out of previous marriages or out of wedlock: (iv) children, if any, of unmarried applicants. Full details are required whether the persons concerned intend to proceed to Namibia or not or are already in Namibia. If the applicant is a child, details of parents, brothers and sisters under 21 years must be furnished.

SURNAME:		FIRST NAME(S):	
Relationship to Applicant, e.g. wife, husband, son, daughter:		Occupation:	
Date of Birth:	Place of Birth Country:	Place of Birth Town/City:	
Present Nationality:	Religion:	Denomination of your Church:	
Highest educational and vocational qualifications (or number of years of schooling completed successfully):			
SURNAME:		FIRST NAME(S):	
Relationship to Applicant, e.g. wife, husband, son, daughter:		Occupation:	
Date of Birth:	Place of Birth Country:	Place of Birth Town/City:	
Present Nationality:	Religion:	Denomination of your Church:	
Highest educational and vocational qualifications (or number of years of schooling completed successfully):			

SURNAME:		FIRST NAME(S):	
Relationship to Applicant, e.g. wife, husband, son, daughter:		Occupation:	
Date of Birth:	Place of Birth Country:	Place of Birth Town/City:	
Present Nationality:	Religion:	Denomination of your Church:	
Highest educational and vocational qualifications (or number of years of schooling completed successfully):			

SURNAME:		FIRST NAME(S):	
Relationship to Applicant, e.g. wife, husband, son, daughter:		Occupation:	
Date of Birth:	Place of Birth Country:	Place of Birth Town/City:	
Present Nationality:	Religion:	Denomination of your Church:	
Highest educational and vocational qualifications (or number of years of schooling completed successfully):			

SURNAME:		FIRST NAME(S):	
Relationship to Applicant, e.g. wife, husband, son, daughter:		Occupation:	
Date of Birth:	Place of Birth Country:	Place of Birth Town/City:	
Present Nationality:	Religion:	Denomination of your Church:	
Highest educational and vocational qualifications (or number of years of schooling completed successfully):			

(b) Wife's maiden name _____; and (c) any other former surnames _____			
(d) Names of the persons mentioned under paragraph 2 (a) who do not wish to apply for permanent residence and the reasons therefor:			

3. If a wife and children wish to join a husband who is already in Namibia or if a husband who is in Namibia wishes his wife and children to join him the address of husband or wife must be furnished below:

Present address

4. **DETAILS REGARDING APPLICANT AND (IF APPLICABLE) WIFE AND CHILDREN**

The following questions relate to you (the applicant) as well as to any person mentioned under the paragraph 2 (a) and must be answered "YES" or "NO"

- (a) Have you or any persons concerned ever been:
- (i) convicted of a criminal offense even if such conviction is no longer on record against you or the person concerned? _____
 - (ii) declared insolvent? _____
 - (iii) the subject of civil action? _____
- (b) Will you or any of the persons concerned leave any debts behind on your departure or, if you are already in Namibia leave any debts behind abroad? _____
- (c) Is there a civil or criminal enquiry pending against you or any of the persons concerned? _____
- (d) Have you or any of the persons concerned previously applied to immigrate to or settle permanently in Namibia? _____
- (e) Have you or any of the persons concerned ever been refused permanent residence in or entry to or been repatriated or deported from Namibia or any other country? _____
- (f) Have you or any other of the persons concerned ever previously been to Namibia for longer than three months? _____
- (g) Do you or any of the persons concerned suffer, or have any of you ever suffered from or been treated for any physical or mental disability? _____

For:

N.B. If the answer to any of the questions 4 (a) to (g) on page 2 is "YES" give full details below. In connection with question (a) (ii) state whether or not you or the persons concerned have been rehabilitated. In respect of question (f) actual period and addresses of residence must be furnished.

5. Have you or any of the persons concerned ever emigrated to another country?
 If so, please state which person(s), the countries of previous immigration, and the year in each case?

6. (a) What is your present occupation? _____
 (b) What occupation do you intend following in Namibia? _____

7. Name and address of present employer: _____

8. Address at which you can be contacted in Namibia: _____

Note: Any incorrect information or false documents furnished in support of this application may result in the applicant and his/her dependants being refused permission to enter into or to remain in Namibia.

9. We the undersigned, declare that the photograph(s) submitted in support of this application are a true likeness of the person(s) whose address appear on the reverse side thereof and that the details reflected in this application and supporting documents are true and correct and that it is my/our firm intention to reside permanently in Namibia and that neither I/we nor any of the persons mentioned under paragraph 2 (a) have ever received any financial assistance from the Namibian Government, or any agency acting on its behalf for the purpose of proceeding to settling in Namibia.

Signature of Applicant: _____ Date: _____

Signature of Legal Spouse: _____ Date: _____

**FOR OFFICIAL USE
 (PHOTOGRAPHS)**



REPUBLIC OF NAMIBIA

REF: _____

MINISTRY OF HOME AFFAIRS DEPARTMENT OF CIVIC AFFAIRS

QUESTIONNAIRE - TRAINING AND EXPERIENCE (PERMANENT RESIDENCE)

Persons who intend to apply for a residence permit in the Republic of Namibia are requested to fill in this questionnaire and return it to the Under Secretary, Department of Civic Affairs, Private Bag 13200, WINDHOEK

Name and First Name(s)	Mr _____ Mrs _____ Miss _____
Present Address: _____ (All First Names as reflected on birth certificate)	
Nationality at present: _____ At birth: _____ Religion: _____	
Date of birth: _____ Birthplace: _____ Country: _____ Age: _____	
Marital Status	<input type="checkbox"/> Never married <input type="checkbox"/> married <input type="checkbox"/> widowed <input type="checkbox"/> divorced <input type="checkbox"/> estranged

Do you or any of your dependents suffer or have any of you ever suffered from any physical or mental disability? Yes No

If yes, give full details _____

Will your wife and child(ren) accompany you to Namibia? Yes No

If "no", please state reasons therefore: _____

Number and age of all your children _____

Details regarding children over the age of 15 years but not older than 21 years:

Name	Date and place of birth	School and professional qualifications

Have you ever been or resided in Namibia? _____

If so, please state type of visa and exact dates (from/to) of stay: _____

IMPORTANT:

Questions (A) and (D) to (L) must be completed by all applicants in detail:

(A) SCHOOL EDUCATION

Number of years of schooling: _____

Primary School _____ years Secondary School _____ Years

High School _____ years Professional School _____ Years

Year in which passed: _____

Highest examination passed: _____

(L) LANGUAGE PROFICIENCY

[i] What is your mother tongue:

[ii] What is your proficiency in other languages? (Answer "A" = very good; "B" = good; "C" = fair or "D" = nil under the different headings)

Speak	Read	Write
(a) English		
(b)		
(c)		

(M) Details of relatives/friends resident in Namibia

NAME	ADDRESS	RELATIONSHIP

(N) All addresses where you resided from the age of 18 years:

No. and Street	City	Country	from	to

Name of your father: _____
Surname First Name(s) Date of birth Place of birth

Maiden name of your mother: _____
Maiden name First Name(s) Date of birth Place of birth

Signature of Applicant Date

(O) IF MARRIED OR INTEND MARRYING BEFORE LEAVING, THE FOLLOWING DETAILS ARE REQUIRED IN RESPECT OF YOUR SPOUSE

Surname, christian name(s) and maiden name: _____

Place of birth: _____ Country _____ Date of birth: _____

Nationality: _____ At birth: _____ Religion _____



REPUBLIC OF NAMIBIA
MINISTRY OF HOME AFFAIRS
DEPARTMENT OF CIVIC AFFAIRS

DECLARATION FORM

To be submitted with Application for Permanent Residence for completion in respect of every person who entered the Republic of Namibia

FOR OFFICIAL USE ONLY
P/R granted on: _____
Permit(s) No(s): _____
Entered by: _____
Date: _____

1. Mode of travel: _____ Place of departure: _____
2. The following particulars are to be furnished in respect of yourself, your wife and children which accompanied you:

Name (Blockletters)		Sex	Date of Birth	Citizenship (state country of which you are a citizen)	Passport No.	Details of arrival	
Surname	First Names					Place	Date
Self	_____						
Wife	_____						
1st Child	_____						
2nd Child	_____						
3rd Child	_____						
4th Child	_____						
5th Child	_____						
6th Child	_____						

3. Marital status (mark with a cross)

Single	Married
Widowed	Divorced

4. Reason for coming to Namibia (mark with a cross)

Business	Holiday	Study	In transit	Permanent residence	Former resident returning after permanent residence abroad
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5. State (a) country where you were permanently resident prior to your departure from Namibia _____
 and (b) your present occupation / occupation as specified on immigration permit _____

I have scrutinized the passport(s) and certify that the particulars therefore entered on this form are correct.

Place: _____ Commissioner of Oaths: _____ Signature of head of family: _____
 Date: _____ Designation: _____ Place: _____ Date: _____



REPUBLIC OF NAMIBIA

Ministry of Home Affairs and Immigration

MEDICAL CERTIFICATE

CONDITIONS OF A RECURRENT NATURE

Although the person(s) may be generally in a good state of health at the time of the examination, it would be appreciated if the Medical Officer/Practitioner could furnish details of any disease, condition or defect the person(s) has/have suffered and which might recur.

I hereby certify that I have examined the following person(s)

- 1. 5.
2. 6.
3. 7.
4. 8.

and find him/her

- (a) not mentally disordered* or physically defective in any way;
(b) not suffering from leprosy, venereal disease, trachoma, tuberculosis or other infectious or contagious diseases;
(c) generally in a good state of health;
except for the following defects observed:

Name of person(s) (Please type or print)

.....
.....
.....
.....

Signature of Medical Officer/Practitioner

Official stamp and address of Medical Officer/Practitioner/Hospital

Date:

Table with 2 columns: Int. Code, *Mental disorders includes the following:
290-299 All psychoses
300 Neurosis
301 Personality disorders
303-304 Addictions
308 Behaviour disturbances of childhood
310-315 All forms of mental retardation
320-349 Epilepsy and all other forms of degeneration of the central nervous system.



REPUBLIC OF NAMIBIA

MINISTRY OF HOME AFFAIRS
DEPARTMENT OF CIVIC AFFAIRS
RADIOLOGICAL REPORT

Note:

- (1) A radiological report of the chest is required in respect of every prospective immigrant 12 years of age and over.
- (2) The radiologist must insert the names of the prospective immigrants examined by him in the space provided for that purpose on the form. Unused spaces must be crossed out.
- (3) A separate report is required in respect of every applicant suffering or suspected to be suffering from tuberculosis.

I hereby certify that I have radiologically examined the chest(s) of the following person(s) and that I could find no signs of active pulmonary tuberculosis.

Name: (1)

(2)

(3)

(4)

(5)

(6)

Official stamp and address of Radiologist/Hospital:

.....
Radiologist

Date:

.....

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