

**Foreign Ministry of the Islamic Republic of Afghanistan**

**Embassy of Afghanistan – Ottawa**

**240 Argyle Ave, Ottawa ON K2P 1B9**

**Tel: 1-613-563-4223 Ext: 222 \* Fax: 1-613-563-4962**

**Email: contact@afghanembassy.ca \* www.afghanembassy.ca**

**POLICE CERTIFICATE REQUEST FORM**

|  |
| --- |
| 1. **Introduction of the Applicant**
 |
| **Title:** | **Surname:** |
| **Given Name(s):** | **Previous Name(s):** |
| **Date of Birth: DD-MM-YYYY** | **Sex: Male Female** |
| **Father’s Name:** | **Nationality:** |
| **Mailing Address:** |
| **Phone Number:** | **Email:** |
| **Legal Status in Canada: Citizen Permanent Resident Landed Immigrant** **Refugee Asylum Seeker Other (explain)** |
| **Relationship to person whose criminal record is requested:** |
| **Do you have any documents verifying your relationship? (such as a marriage certificate) YES NO** **(if YES, please provide the following information)** |
| **Have you enclosed a certified copy of the above document with your application? YES NO** |
| **Reason for requesting police certificate:** |
| 1. **Introduction of the person whose police record is requested**
 |
| **Title:** | **Surname:** |
| **Given Name(s):** | **Previous Name(s):** |
| **Date of Birth: DD-MM-YYYY** | **Sex: Male Female** |
| **Place of Birth:** | **Current Residence (Province/District):** |
| **Father’s Name:** | **Grand Father’s Name:** |
| **Tazkira Number:** | **Tazkira Ref (Page/Volume):** |
| **Have you enclosed a copy of the person’s Tazkira? YES NO****(Please note that a police certificate is not obtainable without a copy of the person’s Tazkira)** |
| 1. **Payment**
 |
| **Have you enclosed the required police certificate fee (US $55)? YES NO****(Please note that your payment will NOT be refunded if your application is processed)** |
| **Have you enclosed an additional (US $16) for postage cost within Canada? YES NO** |
| 1. **Declaration and Signature**
 |
| **I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, solemnly declare that the statements and information I have provided on this form are correct to the best of my knowledge.** **Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: YYYY-MM-DD** |

|  |
| --- |
| **To be Used by Consular Office ONLY** |
| **Total amount received (including bank charges):** |
| **Police Certificate Issued? YES NO** |
| **Consul’s Signature** | **Head of Mission’s Signature** |