**CONSULATE-GENERAL OF THE REPUBLIC OF GHANA**

**HAMBURG**



**APPLICATION FOR RESTORATION OF CITIZENSHIP UNDER ARTICLE 6(1) AND 6(2)**

**OF THE 1992 CONSTITUTION OF GHANA**

NOTE: Applicants are requested to submit the following:

1. Two (2) Completed Copies of this Form
2. Two (2) Passport-sized Photographs
3. Ghanaian Citizenship Renunciation Certificate **OR** German Naturalization Certificate **OR** Affidavit by a Ghanaian Relative attesting to Applicant**'**s Ghanaian Citizenship
4. Copies of Applicant**'**s German Passport

SURNAME:. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

FIRST NAME: . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

MIDDLE NAME(S): . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

FORMER NAME**:** . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

# (If original name has been changed)

DATE OF BIRTH:. . . . . . . . . . . . . . COUNTRY OF BIRTH:. . . . . . . . . . . . *Year Month Day*

PRESENT NATIONALITY:. . . . . . . . . . . . . . . . . . . . . . . . . .

DATE OF ACQUISITION:. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

# Year Month Day

ADDRESS IN DETAIL

|  |  |
| --- | --- |
| *(a) Residential Address in Germany* | *(b) Residential/Postal Address in Ghana* |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

PARTICULARS OF FOREIGN PASSPORT

No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Issue \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Issue \_\_\_\_\_\_\_\_\_\_\_\_\_\_

OCCUPATION PROFESSION

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I . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . hereby

apply for restoration of my citizenship of Ghana and declare that the foregoing particulars are true and correct.

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

*Signature of Applicant*

*.* . . . . . . . . . . . . . .

*Email and contact number*

# FOR OFFICE USE ONLY

Subscribed this . . . . . . . . . day of . . . . . . . 20 . . . . before me.

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

*(Name in Block Letters)*

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

*Signature*

. . . . . . . . . . *Official Title*