



High Commission for the People's Republic of Bangladesh, Canada

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Please attach 1 copy of
40 mm X 50 mm
photograph taken within
the last six months

APPLICATION FOR ALIVE CERTIFICATION

Service Priority: Ordinary Urgent

PLEASE COMPLETE ALL ITEMS OR WRITE "N/A" (NOT APPLICABLE) IF NEEDED. PLEASE TYPE IN BOLD LETTERS

1. Name: _____

2. Nationality: _____ 3. Profession: _____

4. Date of birth: _____ [DD- MM- YYYY] 5. Place of birth (District): _____

6. Sex: Male Female Other 7. Marital status: Single Married Widow/Widower Divorced

8. Father's / Husband's Name: _____ Nationality: _____

9. Present Address

10. Address in Bangladesh

House/Apt: _____ Street: _____

Village/Area/Road: _____

City: _____ Province: _____ Postal: _____

Post Office: _____ Thana/Upazila: _____

Tel: _____ E-mail: _____

District: _____ Tel (if any): _____

11. Particulars of your Bangladesh Passport:

Passport No: _____ Place of issue: _____ Date of issue: _____ [DD- MM - YYYY]

Date of Expiry: _____ [DD- MM - YYYY]

12. Method of Payment Bank Draft / Money Order No/Receipt No: _____ Date: _____ [DD - MM -YYYY]

Issued by: _____ Amount (C\$): _____

The best of my knowledge and belief the information given in this application is correct. I am fully aware that by making a statement that is not true, I will render myself liable to prosecution under the law.

13. Certificate issuing Authority in Canada:

issuing person's Name: _____ Institute Name: _____

House/ Apt: _____ Street: _____ City: _____ Province: Postal: _____

Tel: _____ E-mail: _____

Signature of the Applicant:

Date: _____

Place: _____

Office Use Only :

Remarks:

Serial No: _____ Passport No: _____

Amount(C\$) _____ Receipt no: _____

Signature of the issuing officer:

Date: _____