



Information for verification of Swedish citizenship (all parts must be filled in)

Date _____

Personal data

| | |
|--|--------------------------|
| Surname | All given names |
| Temporary address in Sweden | Personal identity number |
| Telephone number (including area code) in Sweden | E-mail |

Address in country of residence

| | |
|--|---------|
| Address in country of residence | |
| Town/city/postcode | Country |
| Telephone number (including country and area code) | |

Personal data - parents -compulsory for all applicants

| | | |
|--------------------------------------|---|--------------------------|
| Your fathers's surname | | |
| All given names | Personal identity number or date of birth | |
| Place and country of birth | Most recent residence in Sweden | Date of marriage |
| Citizenship (if multiple, state all) | If other than Swedish - date acquired | Date of move from Sweden |
| Your mother's surname | | |
| All given names | Personal identity number or date of birth | |
| Place and country of birth | Most recent residence in Sweden | Date of marriage |
| Citizenship (if multiple, state all) | If other than Swedish - date acquired | Date of move from Sweden |

Residence in and visit to Sweden

| <input type="checkbox"/> Born in Sweden | <input type="checkbox"/> Born outside Sweden | |
|--|--|-----------------|
| <input type="checkbox"/> I have lived in Sweden during the period _____ | | |
| <input type="checkbox"/> I have visited Sweden the following times (to be filled in if you were not born i Sweden and have not been resident in Sweden) | | |
| Place of stay in Sweden | Period of stay in Sweden (start date - end date) | Reason for stay |
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Acquisition of Swedish citizenship

| | | | |
|--|---|--|--------------------------------------|
| <input type="checkbox"/> By birth | <input type="checkbox"/> By application | <input type="checkbox"/> By notification | <input type="checkbox"/> By marriage |
| <input type="checkbox"/> By other means, state how | | | Date acquired |

Acquisition of foreign citizenship

| | |
|--|--|
| <input type="checkbox"/> No <input type="checkbox"/> Yes, citizen of | Date acquired |
| How was the foreign citizenship acquired? | |
| <input type="checkbox"/> By birth <input type="checkbox"/> By application <input type="checkbox"/> By notification | |
| <input type="checkbox"/> By marriage | Woman who is/has been married to a foreign citizen Date of marriage _____ Husband's citizenship at time of marriage _____ |
| <input type="checkbox"/> By other means, state how _____ | |
| I have notified the Swedish Tax Agency that I have moved abroad | |
| <input type="checkbox"/> No <input type="checkbox"/> Yes, date of move _____ | |

| Country of residence outside Sweden | Since (year) | Employer/own business |
|-------------------------------------|--------------|-----------------------|
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I solemnly declare that the above information is correct

| | |
|------|-----------|
| Date | Signature |
|------|-----------|

Parent or guardian's signature for minors

| | |
|------|--------------------------------|
| Date | Signature of parent/guardian 1 |
| Date | Signature of parent/guardian 1 |