



REGERINGSKANSLIET

Information for verification of Swedish citizenship  Passport  Emergency Passport  ID-Card

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	Country
Telephone number (including country/area code)	

**Personal data – Parents (if adopted, give your adoptive parents' data)**

Your father's surname		
All given names		Personal identity number / 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 name		
All given names		Personal identity number/ 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 was resident in Sweden during the period .....		
<input type="checkbox"/> I have visited Sweden at the following times (to be filled in if you were not born in 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

**Place for collection of the new passport**

At Embassy in Bangkok  At Embassy/Consulate of Sweden in .....

*Please be informed that there is a delivery fee of 200 SEK to be paid when collecting your new passport at another embassy/consulate. If you would like to pick up your new passport in Phuket, Pattaya, Chiang Mai, Hua Hin, Phnom Penh, Yangon or Vientiane, a postal fee is to be paid upon application.*

**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	
<input type="checkbox"/> By other means (State how)	Date of marriage	Husband's citizenship at time of marriage
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	Since (year)	Employer/own business

**I solemnly declare that the above information is correct**

Date	Applicant's signature  <div style="text-align: right;">(Signature)</div>
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**Parent or guardian's signature for minors**

Date	Place
(Signature of parent/guardian 1)	(Signature of parent/guardian 2)
(Name in block letters for parent/guardian 1)	(Name in block letters for parent/guardian 2)