

## 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		ļ	
Address in country of residence			
Town/city/postcode		Country	
Telephone number (including country and area code)			
Personal data - parents -compuls	sory for all applicants		
Residence in and visit to Sweden			
Your fathers's surname			
All given names		Personal identity i	number or date of birth
Place and country of birth	Most recent residence in Sweden	l .	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 r	number or date of birth
Place and country of birth	Most recent residence in Sweden	l	Date of marriage
Citizenship (if multiple, state all)	If other than Swedish - date acquired		Date of move from Sweden
Born in Sweden	Born outside Swede	n	•
I have lived in Sweden during	the period		
I have visited Sweden the foll	owing times ( to be filled in	a if you were <b>n</b>	ot born i Sweden, and have not
been resident in Sweden )	owing times ( to be lined in	i ii you were ii	ot bom i sweden and have not
Place of stay in Sweden	Period of stay in Sweden (s	tart date -	Reason for stay
	end date)		

Acquisition of Swedish citizensh	ip	
By birth By applicat	tion By notification	By marriage
By other means, state how		Date acquired
Acquisition of foreign citizenship	)	
No Yes, citizen of		Date acquired
How was the foreign citizenship acc		L
By birth By applica		
By marriage	Woman who is/has been married  Date of marriage	to a foreign citizen  Husband's citizenship at time of marriage
By other means, state how		
I have notified the Swedish Tax Agen  No Yes, date of move		
Country of residence outside Swed	en Since (year)	Employer/own business
I solemnly declare that the ab	ove information is correct	
I solemnly declare that the ab	ove information is correct  Signature	
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_		
Parent or guardian's signature	Signature e for minors	
Date	Signature	an 1
Parent or guardian's signature	Signature e for minors	