

City/Town/Village

Country

Residential Address
Plot/House No.

Street/Ward

City/Town/Village

Country

Qualification

Occupation

DETAILS OF NEXT OF KIN

Surname

First Name

Telephone

Cellphone

Relations

I hereby declare that the information provided by me in this application is true, correct and complete to the best of my knowledge. I understand that any incorrect, misleading or untrue information or withholding of any relevant information may affect the issuance of the Botswana Blue Card or shall result in the revocation of the Blue Card.

Date:

Signature:

Commissioner of Oath

Declared before me at:

Place:

Date: Time:

Name of Commissioner of Oaths:

Telephone Number:

Designation of Commissioner of Oaths:

(Commissioner of Oaths Signature)

(Official Stamp)