

EMBASSY OF THE REPUBLIC OF GHANA, BERLIN



**APPLICATION FOR RESTORATION OF CITIZENSHIP UNDER ARTICLE 6(1) AND 6(2)
OF THE 1992 CONSTITUTION OF GHANA**

NOTE: Applicants are requested to submit-

- (a) two (2) completed copies of this form
- (b) two (2) identical passport-sized photographs
- (c) renunciation certificate **OR** naturalization certificate **OR** affidavit by a Ghanaian relative

SURNAME:

FIRST NAME:

MIDDLE NAME(s):

FORMER NAME:
(If original name has been changed)

DATE OF BIRTH: COUNTRY OF BIRTH:
Year Month Day

PRESENT NATIONALITY:

DATE OF ACQUISITION:
Year Month Day

ADDRESS IN DETAIL

(a) Permanent Address (Home)

*(b) Former Address in Ghana if resident
Outside of Ghana*

PARTICULARS OF PRESENT FOREIGN PASSPORT

No. _____ Date of Issue _____ Place of Issue

OCCUPATION

PROFESSION

I hereby
apply for restoration of my citizenship of Ghana and declare that the foregoing particulars are
true and correct.

.
Signature of Applicant

.
Email and contact number

FOR OFFICE USE ONLY

Made and subscribed this day of 20
before me.

.
(Name in Block Letters)

.
Signature

.
Official Title