APPLICATION FOR AN EXEMPTION CERTIFICATE

For Official Use Only:

Form 3A

File Number:

REPUBLIC OF BOTSWANA
IMMIGRATIOIN ACT
(Regulation 12)
Please use block letters and black ink only

1. Surname:

First Name:

Middle Name:

Previous/Maiden Surname:

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Separated

2. Date of Birth:

D D M M Y Y Y Y

4. Sex: Male ☐ Female ☐

3. Country of Birth:

Place of Birth:

Passport Details
Self:

Passport Number:

Place of Issue:

Date of Issue:

Expiry Date:

Nationality (state name of country)

Name of Business/Undertaking/Organization

Address

Capacity in which employed:

Qualification and / or experience

State proposed period of engagement

Name	Age	GENDER Male/Female	

I (Full Name of Applicant)

_____

Declare that the information furnished by me in this application is true and correct

Date:

D D M M Y Y Y Y

Signature of Application:

For Commissioner of Oaths

_____

(Commissioner of Oaths Signature)

(Official Stamp)