

HIGH COMMISSION OF INDIA
PORT OF SPAIN: TRINIDAD

(Consular Section)
(To be completed in duplicate)

CITIZENSHIP ACT, 1955, SECTION 8

Declaration of renunciation of citizenship under Section 8 of the Act made by
a citizen of India who is also a citizen or national of another country.

1. I, _____ of _____
(Expanded initials) (Full address & Tel No.)
am of full capacity and was born at _____ Distt. (_____) in
_____ (State) on the _____ (Nineteen _____).

2. I have / have not been married.

3. I am a citizen / national of _____ under the law of that country.

4. I hereby renounce my citizenship of India.

I _____ do solemnly and sincerely declare that the
(expanded initials)

foregoing particulars stated in this declaration are true, and I make this
solemn declaration conscientiously believing the same to be true.

Place _____

Date _____

Signature _____

Made and subscribed this _____ day of _____ before me.

Signature and designation of
Officer authorized under rule 28 of
the Citizenship Rule, 1956, before
whom the registration, declaration
or oath of allegiance is made or taken.

Signature

Designation

PARTICULARS

1. Full Name _____

2. Full postal address (in India) _____

3. Full postal address (in the country of residence) _____

4. Passport No., date and place of issue _____

5. Profession or occupation _____

6. Place of birth _____

7. Date of birth _____

8. Second nationality _____
9. Marital status _____
10. Name of wife / husband & nationality _____
11. Names of parents: Father: _____
 Mother: _____
12. Names of parents: Father: _____
 Mother: _____
13. Name & full particulars of children (if any) and their nationalities:-
- 1.
 - 2.
 - 3.
 - 4.
 - 5.
 - 6.

I, the undersigned, hereby state that I am an Indian citizen otherwise than by naturalization; that I am householder, and that I am not the solicitor or agent of _____. I vouch for the correctness of the statements made by _____ in his application for _____.

Place: _____
Date: _____

Signature: _____
Full Name: _____
Full Postal _____
Address: _____
Tel. No. _____
