

Affidavit Application Form

a) Applicant 1 (Fill out applicant 2 for more than one applicant)

1. Identification

1.1 Surname <input style="width: 95%;" type="text"/>	1.2 Other Surnames <input style="width: 95%;" type="text"/>
1.3 First and Middle Name <input style="width: 98%;" type="text"/>	
1.4 Gender 1.5 Marital Status <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Free Union	

2. Identification/Passport Information

2.1 Dominican Documents	2.2 Other Country _____
Passport # <input style="width: 80%;" type="text"/>	Passport # <input style="width: 80%;" type="text"/>
Cedula # <input style="width: 80%;" type="text"/>	ID # <input style="width: 80%;" type="text"/>
Other (Specify) <input style="width: 80%;" type="text"/>	Other (Specify) <input style="width: 80%;" type="text"/>

3. Birth and Nationality Information

3.1 Date of Birth <input style="width: 20px;" type="text"/> dd <input style="width: 20px;" type="text"/> mm <input style="width: 40px;" type="text"/> yyyy	3.2 Country of Birth <input style="width: 95%;" type="text"/>
3.3 State <input style="width: 98%;" type="text"/>	
3.4 City <input style="width: 98%;" type="text"/>	
3.5 First Nationality <input style="width: 98%;" type="text"/>	
3.6 Second Nationality (If any) <input style="width: 98%;" type="text"/>	

4. Education

4.1 Highest Academic Degree <input style="width: 95%;" type="text"/>
4.2 Occupation <input style="width: 95%;" type="text"/>

5. Current Location (Residence)

5.1 Country <input style="width: 95%;" type="text"/>
5.2 State <input style="width: 95%;" type="text"/>
5.3 City/Zip Code <input style="width: 95%;" type="text"/>
5.4 Address <input style="width: 98%;" type="text"/>
5.5 Home Telephone Number <input style="width: 95%;" type="text"/>
5.6 Mobile Telephone Number <input style="width: 95%;" type="text"/>
5.7 Work Telephone Number <input style="width: 95%;" type="text"/>
5.8 Fax Number <input style="width: 95%;" type="text"/>
5.9 E-mail <input style="width: 95%;" type="text"/>

a) Applicant 2

1. Identification

1.1 Surname <input style="width: 95%;" type="text"/>	1.2 Other Surnames <input style="width: 95%;" type="text"/>
1.3 First and Middle Name <input style="width: 98%;" type="text"/>	
1.4 Gender 1.5 Marital Status <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Free Union	

2. Identification/Passport Information

2.1 Dominican Documents	2.2 Other Country _____
Passport # <input style="width: 80%;" type="text"/>	Passport # <input style="width: 80%;" type="text"/>
Cedula # <input style="width: 80%;" type="text"/>	ID # <input style="width: 80%;" type="text"/>
Other (Specify) <input style="width: 80%;" type="text"/>	Other (Specify) <input style="width: 80%;" type="text"/>

3. Birth and Nationality Information

3.1 Date of Birth <input style="width: 20px;" type="text"/> dd <input style="width: 20px;" type="text"/> mm <input style="width: 40px;" type="text"/> yyyy	3.2 Country of Birth <input style="width: 95%;" type="text"/>
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3.4 City <input style="width: 98%;" type="text"/>	
3.5 First Nationality <input style="width: 98%;" type="text"/>	
3.6 Second Nationality (If any) <input style="width: 98%;" type="text"/>	

4. Education

4.1 Highest Academic Degree <input style="width: 95%;" type="text"/>
4.2 Occupation <input style="width: 95%;" type="text"/>

5. Current Location (Residence)

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Affidavit Application Form

b) Affidavit Purpose

c) Witness

1. Identification

1.1 Surname <input style="width: 95%;" type="text"/>	1.2 Other Surnames <input style="width: 95%;" type="text"/>
1.3 First and Middle Name <input style="width: 98%;" type="text"/>	
1.4 Gender <input type="checkbox"/> M <input type="checkbox"/> F	
1.5 Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Free Union	

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Passport # <input style="width: 95%;" type="text"/>	Passport # <input style="width: 95%;" type="text"/>
Cedula # <input style="width: 95%;" type="text"/>	ID # <input style="width: 95%;" type="text"/>
Other (Specify) <input style="width: 95%;" type="text"/>	Other (Specify) <input style="width: 95%;" type="text"/>

3. Birth and Nationality Information

3.1 Date of Birth	3.2 Country of Birth			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; border: 1px solid black; text-align: center;">dd</td> <td style="width: 20%; border: 1px solid black; text-align: center;">mm</td> <td style="width: 60%; border: 1px solid black; text-align: center;">yyyy</td> </tr> </table>	dd	mm	yyyy	<input style="width: 98%;" type="text"/>
dd	mm	yyyy		
3.3 State <input style="width: 98%;" type="text"/>				
3.4 City <input style="width: 98%;" type="text"/>				
3.5 First Nationality <input style="width: 98%;" type="text"/>				
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5. Current Location (Residence)

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