

DETAILS ON ESTONIAN CITIZENSHIP *This complementary form is filled out when applying for an Estonian citizen's identity document for the first time.*

PERSONAL DATA OF APPLICANT

Given name or names	Surname or surnames	
Place of birth (<i>country</i>)	Estonian personal identity code or date of birth (<i>dd/mm/yyyy</i>)	Gender <input type="checkbox"/> male <input type="checkbox"/> female

APPLICANT'S BASIS FOR HOLDING ESTONIAN CITIZENSHIP

Acquired by birth (please provide the information for both parents)

Mother's given name Mother's surname

Mother's Estonian personal identity code or date of birth (*dd/mm/yyyy*).....

Place of birth (*country*) Citizenship

Mother's former names

Father's given name Father's surname

Father's Estonian personal identity code or date of birth (*dd/mm/yyyy*)

Place of birth (*country*) Citizenship

Father's former names

Acquired by marrying an Estonian citizen before 26.02.1992

Spouse's given name Spouse's surname.....

Spouse's date of birth (*dd/mm/yyyy*) Place of birth (*country*)

Acquired by the mother marrying an Estonian citizen before 26.02.1992

Mother's given name Mother's surname

Mother's date of birth (*dd/mm/yyyy*) Place of birth (*country*)

Given name of mother's spouse Surname of mother's spouse

Date of birth of mother's spouse (*dd/mm/yyyy*) Place of birth (*country*)

Acquired by being raised in a children's home in Estonia before 01.04.1995

Date of issue of certificate of having been raised in a children's home in Estonia (*dd/mm/yyyy*)

Place of issue of certificate

I confirm that I have provided only accurate information. I am aware that providing false information is punishable.

Date (<i>dd/mm/yyyy</i>)	Signature of applicant or applicant's legal representative
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RESERVED FOR OFFICIAL USE

Accepted for processing (<i>dd/mm/yyyy</i>)	Name, signature
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