

For office use only

Total Periods for this Applications	Checked by
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APPLICATION FOR POLICE CLEARANCE CERTIFICATE
POLICE HEADQUARTERS, COLOMBO - 01, SRI LANKA

(PLEASE FILL IN BLOCK LETTERS)

NAME IN FULL [Grid for Name]

NIC NUMBER HIGH COMMISSION NO:

PASSPORT NUMBER [Grid for Passport No]

NATIONALITY RELIGION:

DATE OF BIRTH SEX : MALE FEMALE

OCCUPATION : [Grid for Occupation]

PURPOSE : RESIDENCE VISA TEMPORARY VISA EMPLOYMENT STUDY SCHOLARSHIP

STATUS REV. MARRIED. UNMARRIED

HAVE YOU APPLIED FOR A CERTIFICATE PREVIOUSLY : YES NO COUNTRY [Grid]

IF SO, WAS A CERTIFICATE ISSUED TO YOU : YES NO

IF ISSUED REFERENCE NO A11(I) / DATE [Grid]

PRESENT ADDRESS [Grid]

(LOCAL) [Grid]

PRESENT ADDRESS [Grid]

(FOREIGN) [Grid]

PLACE OF RESIDENCE FOR THE PERIOD CERTIFICATE IS REQUIRED *(If insufficient space, give details on attachment)*

ADDRESS	POLICE AREA	DATE	
		FROM	TO

• **IF POLICE AREA INCORRECT FILLED, YOUR CLEARANCE CERTIFICATE COULD GET DELAYED**

THE PERIOD FOR WHICH THE CERTIFICATE IS REQUIRED

LESS THAN ONE YEAR 1 TO 5 YEARS 5 TO 10 YEARS OTHER

IF OTHERS (SPECIFY)

ADDRESS (HIGH COMMISSION/EMBASSY/CONSULATE) TO WHICH THE CERTIFICATE SHOULD BE ADDRESSED TO ADDRESS

BY HAND BY POST HOW YOU WISHED TO RECEIVE THIS CERTIFICATE

TELEPHONE NUMBER:

EMAIL ADDRESS :

DATE:-

SIGNATURE OF APPLICANT

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DATE :

REFERENCE NUMBER :

POLICE STATION	DATE SENT			DATE RETURNED			REMARKS

	DATE SENT			DATE RETURNED			REMARKS
CID							

	DATE SENT			DATE RETURNED			REMARKS
NIB							

BR NUMBER :

DATE OF ISSUED :

MANNER OF DISPATCH

POSTED	
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BY HAND	
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APPLICATION FOR POLICE CLEARANCE REPORT

01. (a) Applicant's Full Name:-
(b) NIC No.:-
(c) Nationality:-
02. (a) Spouse's Full Name:-
(b) NIC No.:-
(c) Nationality (If certificate is necessary):-
03. (a) Other's Full Name:-
(b) NIC No.:-
(c) Nationality (If certificate is necessary):-
04. Addresses of the places where the applicant lived since birth (Both in Sri Lanka and Abroad). The relevant Police area in Sri Lanka to be stated.

Applicant's Address	Spouse's Address	Other Address

05. The Purpose for which Clearance Certificate is required :
(This Certificate is issued to persons above the age of 16 years.)

Date:-

.....
Signature of Applicant.

Embassy Database Update of Sri Lankan and Sri Lankan/American in the United States

Please provide the following details accordingly,

Title Mr. / Mrs. / Ms.

First Name

Last Name

Name of Spouse
Optional

Street Address

City

State Zip

Home Phone Mobile

Email

Profession
Optional

Sri Lankan Sri Lankan/American