



High Commission for Bangladesh, Canada

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Please attach 1 copy of
40 mm X 50 mm
photograph taken within
the last six months

APPLICATION FOR ATTESTATION / CERTIFICATION

Service Priority: Ordinary Urgent

Service requested for: Driver License Attestation of documents
Other (Specify) _____

PLEASE COMPLETE ALL ITEMS OR WRITE "N/A" (NOT APPLICABLE) IF NEEDED. PLEASE TYPE OR PRINT IN BOLD LETTERS

1. Name: _____
2. Nationality: _____ 3. Profession: _____
4. Date of birth: _____ [day- month - year] 5. Place of birth (District): _____
6. Sex: Male Female 7. Marital status: Single Married Widow/Widower Divorced
8. Father's Husbands Name: _____ Nationality: _____
9. Present address 10. Permanent address in Bangladesh

House/Apt: _____ Street: _____

City: _____ Province: _____ Postal: _____

Tel: _____ Cell: _____

Village/Area/Road: _____

Post Office: _____ Thana/Upazila: _____

District: _____ Tel (if any): _____

11. Particulars of your Bangladesh Passport:

Passport No: _____ Place of issue: _____ Date of issue: _____ [day- month - year]

Date of Expiry: _____ [day- month - year]

12. Particulars of Bangladesh Driver's License (In case applying for certificate for Driver's License):

License No: _____ Place of Issued: _____ Category Of License: _____

Date of issue: _____ [day- month - year] Date of Expiry: _____ [day- month - year]

13. Particulars of Attestation:

Type of Documents: _____ No of Documents: _____

14. Particulars of Notary Public / Authorized person who has already attested the documents:

Name: _____ Reg. No: _____

Address: _____ Contact Phone No: _____

15. Method of Payment Bank Draft / Money Order No: _____ Date: _____ [day - month -year]

Issued by: _____ Amount (C\$): _____

The best of my knowledge and belief the information given in this application is correct. I am fully aware that by making a statement that is not true, I will render myself liable to prosecution under the law.

Date: _____

Place: _____

Signature of the Applicant:

Office Use Only :

Remarks:

Serial No: _____ Passport No: _____

Amount(C\$) _____ Receipt no: _____

Signature of the issuing officer:

Date: _____