

Chief of the Mission

Embassy of Nepal, Washington DC

I, the undersigned, hereby apply to register my name as well as to obtain NRN ID card as a Non Resident Nepali, Pursuant to clause 3(1) of Non Resident Nepali Act 2064 and 3(1) of Non Resident Nepali Regulations 2066

1. Personal Details

Full Name: .

Date of Birth (MM/DD/YY):

2. Current Address and date of immigration (in the country of residence):

3. Contact Information (Telephone & email):-

Home:

Cell:

Work:

Email:

4. Name of Father or Mother

Full Name:

Nationality:

Citizenship No:

Address:

5. Name of Grandfather or Grandmother

Full Name:

Nationality:

Citizenship No:

Address: .

6. Particulars of Passport:

Passport No: .

Date of Issue (MM/DD/YY): .

Date of Expiry (MM/DD/YY):

Place of Issue & Issuing Authority:

7. Particulars of citizenship certificate (if the applicant was a citizen of Nepal in the past):

Citizenship No:

Place of issue:

Date of issue and issuing authority (MM/DD/YY):

Date of Renouncement (MM/DD/YY):

Address in Nepal while holding the Nepali citizenship:

8. Closest Relative in Nepal

Full Name:

Relations: .

Address:

9. Did the applicant reside in any other countries other than currently residing? If yes, please name the countries with period:

10. Business, Occupation or Employment

Average Annual Turnover or Income (in US\$):

Area of expertise, knowledge, experience skills:

11.a. If the applicant is interested to invest in Nepal, please mention

Area of interest to invest in Nepal:

b. If investment is already made

Name of Project: .

Total investment (in NRS):

Average annual transaction (in NRS):

Total employment generated:

Registration date (MM/DD/YY):

I hereby declare that the above information is true to the best of my knowledge.

Applicant's Signature:

Date: (MM/DD/YY):

Declaration of parents for applying for minors (under 18 years) to be signed by both parents (to be notarized when sent by mail).

I/we hereby confirm that the particulars given in the above application with regard to my/our son/daughter . is true. I/we undertake the entire responsibility for his/her expenses.

Full Name

Signature

Father:

Mother:

To be filled by the Embassy

NRN ID No:

Date of issue: