

ATTENTION: DO NOT FILL OUT THIS FORM. IT IS DESIGNED TO HELP YOU UNDERSTAND INSTRUCTIONS ON THE OFFICIAL POLISH LANGUAGE VERSION OF THE FORM. SUBMIT ONLY A FILLED OUT POLISH LANGUAGE VERSION OF THE FORM.

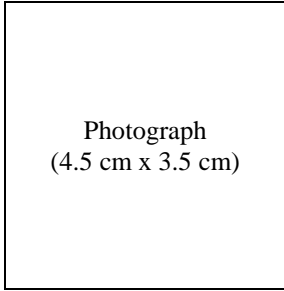
.....
(Seal of the receiving authority)

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year month day
(place and date of filing the application)

Before completing the application, read the instructions on page 5.
The application must be completed in Polish.



**APPLICATION
to restore Polish citizenship**

A. FOREIGN NATIONAL'S PERSONAL INFORMATION

1. Surname	<input type="text"/>																				
2. Surname at birth	<input type="text"/>																				
3. Given name(s)	<input type="text"/>																				
4. Father's given name and surname	<input type="text"/>																				
5. Mother's given name and surname at birth	<input type="text"/>																				
6. Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	7. Sex	<input type="text"/>								
	year				month				day				M- male F - female								
8. Place of birth (city/town/village, country)	<input type="text"/>																				
9. Citizenship	<input type="text"/>																				
10. Marital status	<input type="text"/>																				
11. Polish SSN No. (if assigned)	<input type="text"/>																				

B. FOREIGN NATIONAL'S ADDRESS

1. Province/country	<input type="text"/>																			
2. City/town/village	<input type="text"/>																			
3. Street	<input type="text"/>																			
4. Building number	<input type="text"/>					5. Apartment number	<input type="text"/>													
6. Zip code	<input type="text"/>			-	<input type="text"/>			<input type="text"/>												
7. Contact phone no.	<input type="text"/>																			

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Attachments to the application

(to be attached by the applicant)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

				/				/			
year			month			day			(date)		

.....
(Applicant's signature)

F. ACKNOWLEDGEMENT OF RECEIPT

				/				/			
year			month			day			(date)		

.....
(seal and signature of the person receiving the application)

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G. FOR OFFICIAL USE (to be filled by the processing authority)

Personal system number	<table border="1" style="width: 100%; height: 15px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																		
Application system number	<table border="1" style="width: 100%; height: 15px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																		

INSTRUCTIONS

- 1) All mandatory sections must be completed. If any necessary information is missing, the application may be left unconsidered.
- 2) The application must be completed legibly in block letters and data put in the relevant fields.
- 3) Sections A, B, C, D and E are to be completed by the applicant.
- 4) Section F is to be completed by the receiving authority.
- 5) When providing the marital status in Section A, use one of the following expressions: spinster, bachelor, married, divorced, widow/widower.
- 6) When specifying the province in Section B, give the province name if the applicant resides in the Republic of Poland or the country name if the applicant resides outside the Republic of Poland.
- 7) Section F and Section entitled "FOR OFFICIAL USE" are to be completed by the receiving authority. The "system number" in section "FOR OFFICIAL USE" denotes the system number assigned in the "POBYT" [index of documents] Information System to the person and the application.