Republic of South Sudan
Ministry of Interior
Directorate of Nationality, Passports and Immigration

Application for South Sudan Nationality Certificate by Birth

Form 1(A)

Warning: giving false information is considered a crime in accordance with the South Sudan Nationality Act, 2011 and exposes the applicant and his/her witness to legal action.

Photo

Place of Application: Juba Date: 21 / 10 /20 26

Put check mark (√) where applicable.

Type of Certificate: New ☑ Replacement ☐ Alteration ☐

If not new application, provide Certificate Number: N/A

Place and date of issuance: N/A

A) Statement of Applicant

1. Surname: CHOL
2. Given Names: Nyandeng Grace
3. Father's full name: Deng Akol Chol
4. Mother's full names: Achol Nyok Madit
5. Sex: Male ☐ Female ☑
6. Marital Status: Single ☑ Married ☐ Divorced ☐ Widowed ☐
7. Date of Birth: Day 14 /Month 03 /Year 2000
8. Place of Birth: Juba
9. Place of Origin: State: Lakes County: Rumbek Centre Payam: Malek Boma: Aduel
10. Place of birth of applicant's father: Date: 1968 State: Lakes County: Rumbek East Payam: Malek
11. Place of residence of paternal ancestors: State: Lakes County: Rumbek Centre Payam: Malek
12. Place of residence of maternal ancestors: State: Lakes County: Rumbek Centre Payam: Malek
13. Occupation: Teacher Place of Work: Gumbo Basic Primary School, Juba
14. Residential address: Hai Jalaba, Juba Tel. No: +211 920 000 000

Signature of applicant testifying to correctness of the information provided:

15. Signature: Date: 21 / 10 /20 26

B) Witness:

1. Surname: Deng Given Names: Peter Mading
2. Passport/ID No: S00098765 Place of issues: Juba

   Date of issue: 12/09/2022 Expiry Date: 11/09/2027
3. Witness address: Hai Cinema, Juba Tel. No: +211 921 000 000
4. Occupation: Civil servant
5. Work address: Government office, Juba
6. Relation to applicant: Uncle (father's brother)

By signing below, the witness testifies to the correctness of applicant details provided.

7. Signature: Date: 21/10/2026

C) Recommendation of Boma Authorities

1. Full Name: Michael Lual Deng
2. Title: Boma Chief
3. Signature and Stamp:

D) Recommendation of Payam Authorities

1. Full Name: James Majok Ayuel
2. Title: Payam Administrator
3. Signature and Stamp:

E) Recommendation of County Authorities

1. Full Name: Santino Mayen Akol
2. Title: County Commissioner
3. Signature and Stamp:

For official use:

F) Verification:

1. Computer verification (If Applicable):

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2. Name, rank, signature and stamp of verifier:

G) Verification Officer:

1. Rank and name:.....

2. Signature and stamp:.....

3. Date of investigation:.....

H) Investigations:

The applicant appeared before me, the photograph is typical of him/her, I held a discussion with him/her and he/she said that:

1. He/she is from (tribe):.....

2. Which is settled in the region of:.....

3. And that he/she was born at the area of:.....

4. And his/her father was born at the area of:.....

5. His/her mother was born at the area of:.....

6. His/her paternal descendants are from the area of:.....

7. His/her maternal descendants are from the area of:.....

8. Finger print of applicant

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I) Witness:

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J) Attachment:

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K) Enclosures:

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L) Approving Authority:

1) Rank and name:.....

2) Place of work:.....

3) Authorization number:.....

4) Date:...../...../20..... Decision:.....

5) Stamp and signature:.....

M) Fee:

1. Fee:.....

2. Date of Receipt:...../...../..... Receipt No.:.....

3. Name, signature and stamp of accountant:.....

N) For operations office:

1. Date of issue:..... Certificate No.:.....

2. Rank and Name:.....

3. Signature and stamp:.....