



**HIGH COMMISSION OF THE UNITED REPUBLIC OF TANZANIA
KUALA LUMPUR**

ATTACH A
PASSPORT SIZE
PHOTO

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FAX: (+603) 4251 5641
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No. 44 JALAN U-THANT,
55000 KUALA LUMPUR,
MALAYSIA.

**REGISTRATION FORM FOR TANZANIANS LIVING AND STUDYING IN THE MALYSIAN
FEDERATION AND SOUTH EAST ASIA. (THAILAND, PHILIPPINES, CAMBODIA, LAOS, AND
BRUNEI.)**

Citizens of the United Republic of Tanzania in Malaysia and other South East Asian Countries are advised to register at The High Commission of The United Republic of Tanzania by filling this form and send it to the Embassy by email (kualalumpur@nge.go.tz), together with a passport copy.

I. PERSONAL DETAILS

1	FULL NAME	
2	PASSPORT NUMBER	
3	EXPIRY DATE OF PASSPORT	
4	PASSPORT ISSUING AUTHORITY	
5	SEX	
6	DATE OF BIRTH	
7	PLACE OF BIRTH	
8	MARITAL STATUS	
9	CONTACT DETAILS	Country
		City
		Physical Address
		Tel. Number
		Email

II. ACADEMIC INFORMATION *(this part should be filled by Tanzanians who are students)*

1	NAME OF UNIVERSITY/COLLEGE						
2	COUNTRY						
3	CITY						
4	UNIVERSITY/COLLEGE CONTACT DETAILS	Physical Address					
		Tel. Number					
		Email					
		Contact Person					
5	FACULTY						
6	FIELD OF STUDY <i>(e.g Medicine, Mechanical Engineering etc.)</i>						
7	DEGREE LEVEL (tick accordingly)	Year of Study	Prep.	BSc.	MSc.	Specialty	PhD
8	SPONSORSHIP (tick accordingly)	HESLB	ZHELB	PRIVATE	OTHER		

III. WORK INFORMATION *(this part should be filled by Tanzanians who are working or running their own business)*

1	COMPANY/ORGANIZATION NAME	
2	COUNTRY	
3	CITY	
4	COMPANY/ORGANIZATION CONTACT DETAILS	Physical Address
		Tel. Number
		Email
		Contact Person
5	TYPE OF BUSINESS	
6	POSITION	

IV. SPOUSE INFORMATION *(to be filled by Tanzanians who are in Malaysia and other SEA countries for reasons of marriage)*

1	SPOUSE NAME	
2	CITIZENSHIP	
3	COUNTRY	
4	CITY	
5	CONTACT DETAILS	Physical Address
		Tel. Number
		Email
6	WORK PLACE	Company Name
		Physical Address
		Tel. Number
		Email
		Contact Person

V. DETAILS OF THE NEXT OF KIN IN TANZANIA *(to be contacted in case of emergency)*

1	FULL NAME	
2	RELATIONSHIP	
3	CONTACT DETAILS	Physical Address
		Tel. Number
		Email
6	WORK PLACE	Company Name
		Physical Address
		Tel. Number
		Email
		Contact Person

VI. ADDITIONAL REMARKS

DATE _____

SIGNATURE _____