

SOCIALIST REPUBLIC OF VIETNAM
Independence – Freedom - Happiness

APPLICATION FOR GRANTING CRIMINAL RECORD CERTIFICATES

(For individuals in case of delegation to request issuance of criminal record certificates number 1 and individuals who are parents of juveniles requesting issuance of criminal record certificates number 2)

To:

- 1. Full name ¹:.....
- 2. Other name (if any).....3. Sex:.....
- 4. Date of birth: .../.../.....5.Place of birth²:
- 6. Address³:
-Telephone number :.....
- 7. ID card or passport?:⁴ Number:
- Issued on.....month.....year.....at:
- 8. Delegated by :
- 8.1. Relationship with the delegator⁵ :
- 8.2. Under the Power of attorney signed on ⁶.....month.....year.....

I am applying to request the issuance of criminal record certificates to the following person:

INFORMATION ON THE DELEGATOR OR THE JUVENILE

- 1. Full name ⁷:.....
- 2. Other name (if any):3. Sex
- 4. Date of birth: .../ .../5.Place of birth² :
- 6. Nationality:.....7. Ethnic group:.....
- 8. Permanent address ⁸:
-
- 9. Temporary address⁹:.....
-
- 10. ID card or passport?:.....¹⁰Number:
- Issued on date.....month.....year.....at :
- 11. Telephone/e-mail:.....

INFORMATION ON THE FATHER, MOTHER, SPOUSE OF THE DELEGATOR OR ON THE FATHER, MOTHER OF THE JUVENILE

	FATHER	MOTHER	SPOUSE
Full name			
Date of birth			

RESIDENTIAL HISTORY OF DELEGATOR OR JUVENILE IN VIETNAM¹¹

From.....to.....	Permanent/Temporary residence place	Job, agency address ¹²

Declaration of any criminal records or prohibition from holding certain position, establishing or, managing an enterprise or cooperation (if any):

.....

Request issuance of criminal record certificate⁷: **No. 1** **No. 2**

Request confirmation of any prohibition from holding certain position, establishing or managing an enterprise or cooperative under the decision on bankruptcy declaration (in case of requesting Criminal record certificates No.1)

Yes **No**

Purpose of applying for criminal record certificate:

.....

Number of criminal record certificates requested:certificate(s).

I hereby certify that all the information given above is true and I am responsible for my testimony

....., *date*..... *month* *year*

Applicant
(*Signature, full name*)

Note:

¹ Full name of the person delegated or father/mother of juvenile; In capital letters with full accents.

² Clearly state commune/ward, district, province or city under central control.

³ Clearly state address for contact

⁴ Clearly state ID card or passport.

⁵ Clearly state the relationship in case the person delegated is father, mother, spouse or child of the delegator; in this case no power of attorney is required but papers proving the relationship shall be shown.

⁶ Clearly state in case of power of attorney is available.

⁷ In capital letters with full accents.

^{8,9} In case of having both permanent and temporary residence, declare both places.

¹⁰ Not to declare in case of juveniles under 14 years old.

¹¹ Declare residential history, job and agency place since the age of 14

¹² For those who used to serve in the military, please clearly state the position during military service.