

Consulate General of the Leople's Republic of Bangladesh 1505-2235 Sheppard Avenue East (Atria II) Toronto ONM2J 5B5, Canada Telephone: +1-647-812-2791-2, Fax: +1-416-492-3171

e-mail: consular@bdcgtoronto.ca

Name of the Applicant

Attestation Application Form

Service Priority:	☐ Ordinary ☐ E	Express		Please affix 1 passport size Photograph here
Service requested for:	☐ Educational Certificate	☐ Marria	ige Certificate	
☐ Unmarried Certific	ate Divorce Certificate	☐ Other (Plea	ase specify)	
1.Name:2. Date of Birth:				(dd/mm/yyyy)
3. Nationality at birth		I. Place of birth	(District)	
5. Sex: ☐ Male ☐ Fem	ale 6. Marital status:	☐ Single		Widow/Widower
7 Father's/ Shouse name	7.Father's/ Spouse name:8. Nationality of father or spou			
		O. INALIOI	lailty of lattice of s	spouse
9. Permanent address in E	•			
Village/Road:	Post office:			
Upazila/PS/Town: District:				
Telephone no:	(Bang	ladesh)		
10. Address in Canada:				
Street:	City:	City:Province:		· · · · · · · · · · · · · · · · · · ·
Postal code:	Home Tel./Cell #:		e-mail:	
11. Bangladesh passport i	no:Dat	Date of issue:		(dd/mm/yyyy)
Place of issue:	Date	Date of expiry:		(dd/mm/yyyy)
Or National ID no:				
12. Method of payment: □	Bank draft □Postal order	· □ Pay order	☐ to be paid in	n the Consulate General
13. Bank Draft /Money order/	Certified Cheque no:		lssued	by:
Amount in	Amount in C\$:		Date(dd/mm/yyyy	
☐ I do hereby solemnly decla tion / certification are genuine. I				