



**REPUBLIC OF RWANDA  
HIGH COMMISSION IN CANADA**

**EMERGENCY TRAVEL DOCUMENT-SERVICE REQUEST CONTACT INFORMATION FORM**

**SECTION A – your details:**

GENDER:  MS  MR

FIRST NAME: \_\_\_\_\_

LAST NAME: \_\_\_\_\_

STREET AND HOUSE NR: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ CITY: \_\_\_\_\_

PROVINCE / COUNTRY: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PHOTO

2 colored biometric  
passport  
photographs.

DATE OF BIRTH (DD/MM/YYYY): \_\_\_\_\_

PLACE OF BIRTH (If in Rwanda specify City / Sector/District): \_\_\_\_\_

NATIONAL ID / PASSPORT: \_\_\_\_\_ DATE OF ISSUE (DD/MM/YYYY): \_\_\_\_\_

LEVEL OF EDUCATION AND DOMAIN: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ POSITION: \_\_\_\_\_

WORKING PLACE: (Organization/Company) \_\_\_\_\_

(FOR STUDENT ONLY) FACULTY: \_\_\_\_\_ YEAR OF STUDY: \_\_\_\_\_

(FOR STUDENT ONLY) UNIVERSITY: \_\_\_\_\_

MARITAL STATUS:  SINGLE  MARRIED  WIDOW(ER)  DIVORCED

SPOUSE'S FULL NAME: \_\_\_\_\_

DATE YOU LEFT RWANDA (DD/MM/YYYY): \_\_\_\_\_

FATHER'S FULL NAME: \_\_\_\_\_

MOTHER'S FULL NAME: \_\_\_\_\_

**SECTION B – identity / supporting / required documents:**

YOU ARE REQUIRED TO PROVIDE THESE IDENTITY, SUPPORTING AND OTHER REQUIRED DOCUMENTS OTHERWISE YOUR APPLICATION WILL NOT BE PROCESSED.

A COPY OF YOUR EXPIRED RWANDA PASSPORT

PROOF OF STATUS IN CANADA (RESIDENCY CARD/RESIDENCY PERMIT)

N.B:

**A COVER LETTER IS REQUIRED STATE REASON FOR REQUEST.**

**SECTION C – declaration:**

I AGREE TO INFORM THE COMPETENT SERVICES AT THE EMBASSY IF ANY INFORMATION ON THIS FORM CHANGES BEFORE THE PROCESSING OF MY APPLICATION IS COMPLETE.

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE DETAILS GIVEN ON THIS FORM ARE TRUE AND CORRECT.

DATE (DD/MM/YYYY) :

SIGNATURE : \_\_\_\_\_



**REPUBLIC OF RWANDA  
RWANDA HIGH COMMISSION  
CANADA**

**REQUEST OF CRIMINAL RECORD CERTIFICATE  
GENERAL INFORMATIONS AND DOCUMENTS CHECKLIST**

**A. PAYEMENT OF CONSULAR FEES**

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CONSULAR FEES (35 CAD) MUST BE PAYED FOR EACH APPLICATION. PLEASE NOTE THAT THOSE CONSULAR FEES HAVE TO BE PAID BEFORE SENDING IN YOUR APPLICATION.

**BENEFICIARY:** RWANDA HIGH COMMISSION  
**PAYMENT REFERENCE:** MONEY ORDER OR CERTIFIED  
CHEQUE

**B. MAILING ADDRESS AND CONTACT DATA**

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BE SURE THAT YOU HAVE ADDRESSED THE ENVELOPE, ATTACHED SUFFICIENT POSTAGE AND SEND TO:

**RWANDA HIGH COMMISSION  
294 ALBERT STREET  
OTTAWA, ON K1P 6E6**

IF YOU ARE SENDING MORE THAN ONE APPLICATION, SEND ALL OF THEM TOGETHER IN ONE ENVELOPE. THE APPLICATIONS WILL BE PROCESSED TOGETHER.

YOU CAN CONTACT US DURING BUSINESS HOURS UNDER THE PHONE NUMBER: +1 613-569-5420

OR VIA E-MAIL: [ottawaconsul@minaffet.gov.rw](mailto:ottawaconsul@minaffet.gov.rw) FOR FURTHER INFORMATIONS VISIT: [www.rwandaincanada.gov.rw](http://www.rwandaincanada.gov.rw)

**C. ABOUT THE DOCUMENTS**

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THE APPLICATION FORM IS DESIGNED TO BE "FILLABLE" ON COMPUTER. THIS MEANS THAT YOU SHALL CONVENIENTLY COMPLETE THE FORM RIGHT ON YOUR COMPUTER. YOU CAN THEN SUBMIT IT TO THE EMAIL ADDRESS MENTIONED ABOVE. FAILURE TO PROVIDE A FULLY COMPLETED APPLICATION FORM OR THE NECESSARY DOCUMENTS WILL RESULT IN THE NON-PROCESSING OF YOUR APPLICATION.

THE COPIES OF YOUR DOCUMENTS (FOR EXAMPLE: PASSPORT, ID) MUST BE SCANNED AND READABLE AND IF THEY CONTAIN A PHOTOGRAPH, THE PERSON MUST BE VISIBLE/RECOGNIZABLE. IT MAY BE HELPFUL TO USE A SCANNER.

**NOTE:**

- **ALL DOCUMENTS MUST BE IN KINYARWANDA, ENGLISH, OR FRENCH; DOCUMENTS THAT ARE IN ANOTHER LANGUAGE AND THOSE TRANSLATED DOCUMENTS MUST BE CERTIFIED BY COMPETENT AUTHORITIES.**