

REQUEST FOR CANCELLATION OF CONSULAR REGISTRATION

طلب (الشطب من (التسجيل (القنصلي

I, the undersigned:			
FIRST NAME			
(الأسم	•		
LAST NAME			
اللقب			
DATE OF BIRTH	•	PLACE OF BIRTH .	
تاريخ (الميلاو	•	· مكان (لميلأو	
FATHER'S FIRST NAME			
اسم الوالر	•		
MOTHER'S FULL NAME			
اسم ولقب اللهُم	•		
ADDRESS			
العنوان	•		
STATE	•	ZIP CODE .	
الدولاية	•	•	
Declare the change ACCOMPANYING :	-	om the United States to settle perma to cancel my consular registration. Spouse قارع التروع ال	nently in Algeria or
		ation, I knowledge that I will not be able to lectoral roll within the Consulate General.	request the renewal
Applicant signature توقیع مقرم (لطلب		Date,	