

PEOPLE'S DEMOCRATIC REPUBLIC OF ALGERIA

MINISTRY OF RELIGIOUS AFFAIRS AND ENDOWMENTS

DIRECTORATE GENERAL FOR RELIGIOUS ORIENTATION

AND QURANIC TEACHING

APPLICATION FORM

FOR A CERTIFICATE OF EMBRACING ISLAMIC FAITH

FIRST NAME :.....LAST NAME.....

DATE AND PLACE OF BIRTH.....IN.....

SON (DAUGHTER) OFAND.....

ORIGINAL NATIONALITY..... PRESENT NATIONALITY.....

ORIGINAL RELIGION.....PRESENT RELIGION.....

PROFESSION.....GRADE.....

PERMANENT ADDRESS.....

PRESENT ADDRESS.....

DATE AND PLACE OF MARRIAGE.....

PROCEDURE.....

TEL NUMBERWORKPLACE.....

ENTRY DATE IN ALGERIAIN WHAT CAPACITY.....

PASSPORT N°ISSUED IN.....

SPOUSE NAME.....

DATE AND PLACE OF BIRTH.....

DAUGHTER OFSON OF.....

ORIGINAL RELIGION.....PRESENT RELIGION

PROFESSION.....GRADE

PERMANENT ADDRESS.....

PRESENT ADDRESS.....

NUMBER OF CHILDREN

CHILDREN FIRST AND LAST NAMES

1)-.....5)-.....

2)-.....6)-.....

3)-.....7)-.....

4)-.....8)-.....

QUESTIONNAIRE

DO YOU INTEND TO STAY IN ALGERIA ?.....

.....

WHY ?.....

.....

WHICH LANGUAGES ARE YOU FLUENT IN ?.....

.....

HAVE YOU READ THE QU'RAN ?.....

IN WHAT LANGUAGE ?.....

WHAT HAVE YOU LEARNT ABOUT ISLAM ?.....

.....

.....

IN YOUR QUEST OF UNDERSTANDING ISLAM WHAT ASPECTS DID YOU FOCUS ON ?.....

DID YOU CHOOSE ISLAM WITH DETERMINATION, OR DID YOU INHERIT THIS RELIGION ?.....

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WHAT MADE YOU RNEOUNCE TO YOUR PAST RELIGION IN ORDER TO CONVERT TO ISLAM ?.....

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HOW DO YOU ASSESS YOUR RELATIONS WITH YOUR COLLEAGUES IN PARTICULAR AND WITH PEOPLE IN GENERAL ?.....

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WHAT IS YOUR OVERALL IMPRESSION OF THE SOCIAL MILIEU IN WHICH YOU NOW LIVE ?.....

.....

WHAT ARE YOUR CONCERNS ?.....

.....

FURTHER OBSERVATIONS.....

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**I CERTIFY THAT THIS FORM DOES NOT CONTAIN ANY FALSE, MISLEADING
OR INCOMPLETE INFORMATION, AND DO ASSUME RESPONSIBILITY FOR
ANY INACCURATE INFORMATION.**

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