



ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ
ΥΠΟΥΡΓΕΙΟ ΕΞΩΤΕΡΙΚΩΝ

GREEK CITIZENSHIP BY DECENT APPLICATION FORM

ΓΕΝΙΚΟ ΠΡΟΞΕΝΕΙΟ
ΤΗΣ ΕΛΛΑΔΑΣ ΣΤΟ ΣΥΔΝΕΥ

APPLICANT'S PERSONAL DETAILS	
Last Name	
First Name	
Date & City/town of Birth	
Father's Full Name	
Father's Date & City/town of birth	
Mother's Full Name	
Mother's Maiden Name	
Mother's Date & City/town of birth	
Current Marital Status	
Previous Marriage(s) (pls circle)?	Yes / No If Yes please state how many?
Residential Address	
Phone Number	
Mobile Number	
Email Address	
Profession	
ADDITIONAL FAMILY INFORMATION	
Paternal Grandfather's Full Name	
Paternal Grandfather's Year & City of Birth	
Paternal Grandmother's Full Name	
Paternal Grandmother's Year & City of Birth	
Maternal Grandfather's Full Name	
Maternal Grandfather's Year & City of Birth	
Maternal Grandmother's Full Name	
Maternal Grandmother's Year & City of Birth	
Which Category do you belong to? (Pls circle based on our information leaflet for Greek Citizenship)	1 / 2 / 3 / 4 / 5 / 6 / 7
	8 / 9 / 10 / 11 / 12 / 13
Do you have any adult children (pls circle)?	Yes / No If Yes please state how many?
Do you have any underage children (pls circle)?	Yes / No If Yes please state how many?
Date	Signature
For Office Use Only	
Applicant's category based on above info:	
Required Type of Process:	
Required Type of Documentation:	
Require Stamp Duty fees (EURO):	
Appointment Date:	
Appointment Time:	