

**DECLARATION OF INTENTION TO RETAIN IRISH CITIZENSHIP BY A NATURALISED IRISH CITIZEN RESIDING OUTSIDE IRELAND**

Please note before completing the form:

Section 19 (1) (c) of the Irish Nationality and Citizenship Act 1956, as amended, provides that the Minister for Justice and Equality may revoke a certificate of naturalisation if he is satisfied that (except in the case of a certificate of naturalisation which is issued to a person of Irish descent or associations) the person to whom it is granted has been ordinarily resident outside the State or, in the case of an application for a certificate of naturalisation granted under section 15A, resident outside the island of Ireland (otherwise than in the public service) for a continuous period of seven years and without reasonable excuse has not during that period registered annually in the prescribed manner (using this form) his/her name and a declaration of his/her intention to retain Irish citizenship with an Irish diplomatic mission or consular office or with the Minister.

GUIDANCE ON FILLING OUT THE FORM

This form is a written Statement, declared to be true by you in the presence of an authorised person*. By signing this declaration you are stating that you understand the form and that the facts provided in the form are true and correct to the best of your knowledge. You should complete boxes D1, D2, D3, D4, D5, D6, D7 and D8 and your authorised witness should complete W1, W2, W3 (either W3.0, W3.1 or W3.2), W4, W5, W6, W7 and W8.

* This declaration shall—

(a) if made in the territory of the State, be made before any of the following persons:

- (i) a notary public,
- (ii) a commissioner for oaths,
- (iii) a peace commissioner,
- (iv) a minister of religion stating his or her denomination and address of place of worship,
- (v) a member of Dáil Éireann or Seanad Éireann or a member of the European Parliament for a constituency within the State,
- (vi) a member of a local authority for the purpose of the Local Government Act 2001 (No. 37 of 2001),
- (vii) a barrister or solicitor,
- (viii) a registered medical practitioner for the purpose of the Medical Practitioners Acts 1978 to 2002,
- (ix) a qualified teacher who is a member of the teaching staff of a primary or secondary school or a third level institution

and

(b) if made elsewhere, be made before any of the following persons:

- (i) a person to whom section 5 of the Diplomatic and Consular Officers (Provision of Services) Act 1993 (No. 33 of 1993) applies, namely, the head of an Irish diplomatic mission, a member of the diplomatic staff of an Irish diplomatic mission a career consular officer of Ireland and an honorary consular officer appointed by the Minister for Foreign Affairs,
- (ii) a notary public, or
- (iii) any person who is, by the law of the country in which the declaration is made, a commissioner for oaths or other person authorised to take affidavits and for that purpose to administer oaths.

Send completed form to:

**CITIZENSHIP DECLARATIONS,
IRISH NATURALISATION AND IMMIGRATION SERVICE,
HEFFERNAN HOUSE,
DUNDRUM ROAD,
TIPPERARY TOWN.**

THIS FORM IS ONLY FOR NATURALISED IRISH CITIZENS RESIDING ABROAD, WHO WERE NOT GRANTED A CERTIFICATE OF NATURALISATION AS A PERSON OF IRISH DESCENT OR ASSOCIATIONS.



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DECLARANT TO COMPLETE

I, [NAME IN FULL D1] to whom the under-mentioned particulars relate, hereby declare my intention to retain my Irish citizenship.

SIGNATURE: [D2] DATE: [D4]

ADDRESS: [D3]

WITNESS TO COMPLETE AND CONFIRM WHICH OPTION APPLIES

Declared and subscribed before me [NAME IN CAPITALS W1.1] a [INSERT QUALIFICATION W1.2] by [NAME OF APPLICANT W2]

[who is personally known to me], [W3.0]

OR

[who was identified to me by [NAME W3.1] who is personally known to me],

OR

[whose identity has been established to me before the taking of this Declaration by the production to me of:

passport no. [PASSPORT NUMBER W3.2] issued on [DATE OF ISSUE W3.2] by the Irish State

At [PLACE OF SIGNATURE W4] this [DAY W4] day of [MONTH AND YEAR W4].

SIGNATURE OF WITNESS: [W5]
NAME OF WITNESS: (CAPITALS) [W6]
ADDRESS OF WITNESS: [W7]
DAY-TIME TELEPHONE NUMBER: [W8]

PARTICULARS RELATING TO DECLARANT.

Number of certificate of naturalisation: [D5]
Date of issue of certificate of naturalisation: [D6]
Date of commencement of residence outside Ireland: [D7]
Date and place of last declaration, if any: [D8]