

## Janaza Application Form

### ***Details of the deceased person***

Full Name of the deceased person: \_\_\_\_\_

Gender: Male / Female      Date of birth: \_\_\_\_\_ Date of death: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Nationality: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Cause of death: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please attach a copy of death certificate. Copy of death certificate attached (Please circle): Yes / No

### ***Details of the person filling up the form***

Full Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Relation to the deceased: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Tel No: \_\_\_\_\_ Mob No: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ***Official Use***

Received by: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

Additional Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_