



**PROSILEC (APPLICANT)**

|                                                            |  |
|------------------------------------------------------------|--|
| <b>IME IN PRIIMEK:</b><br>(FIRST AND LAST NAME)            |  |
| <b>DATUM IN KRAJ ROJSTVA:</b><br>(DATE AND PLACE OF BIRTH) |  |
| <b>DRŽAVLJANSTVO:</b><br>(CITIZENSHIP)                     |  |
| <b>TRENTNI NASLOV:</b><br>(CURRENT ADDRESS)                |  |
| <b>TELEFONSKA ŠT.:</b><br>(PHONE)                          |  |
| <b>ELEKTRONSKI NASLOV:</b><br>(E-MAIL ADDRESS)             |  |

**VLAGAM VLOGO ZA - označi (AM APPLYING FOR – check box):**

|                                                                                                                                                                                                        |                                                                                                                                                                                  |                                                                                                                                                                                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>OSEBNI DOKUMENT</b><br>(PERSONAL DOCUMENT)<br><input type="checkbox"/> POTNI LIST (PASSPORT)<br><input type="checkbox"/> OSEBNA IZKAZNICA (ID)                                                      | <b>OVERITEV</b><br>(VERIFICATION OF)<br><input type="checkbox"/> PODPISA (SIGNATURE)<br><input type="checkbox"/> KOPIJE (COPY)<br><input type="checkbox"/> PREVODA (TRANSLATION) | <b>DRŽAVLJANSTVO</b><br>(CITIZENSHIP)<br><input type="checkbox"/> VPIS ROJSTVA<br>(REGISTRATION OF BIRTH)<br><input type="checkbox"/> PRIGLASITEV<br>(REGISTRATION)<br><input type="checkbox"/> DRUGO (OTHER) |
| <b>IZPISEK IZ MATIČNEGA</b><br><b>REGISTRA (CERTIFICATE)</b><br><input type="checkbox"/> O ROJSTVU (BIRTH)<br><input type="checkbox"/> O POROKI (MARRIAGE)<br><input type="checkbox"/> O SMRTI (DEATH) | <b>POTRDILO (CERTIFICATE)</b><br><input type="checkbox"/> OPROSTITEV DDV in<br>CARINE (IMPORT DUTIES)<br><input type="checkbox"/> DRUGO (OTHER):                                 | <b>DRUGO (OTHER):</b>                                                                                                                                                                                         |

**DOVOLJENJE ZA KOPIRANJE:**

Soglašam, da Veleposlaništvo Republike Slovenije v Washingtonu D.C., napravi in hrani kopijo priloženih osebnih dokumentov do izpolnitve namena oziroma do izteka zakonsko določenega roka hrambe. (I agree and allow the Embassy of the Republic of Slovenia in Washington D.C., to make and keep a photocopy of my personal documents submitted as part of said application, until the fulfillment of the purpose of the application or until statutory limits for document storage are reached).

**VPIS NA SEZNAM ZA OBVEŠČANJE (NOTIFICATIONS SIGNUP)**

Podpisani (ustrezno označi)/Undersigned hereby (select)

|                          |                                |
|--------------------------|--------------------------------|
| <input type="checkbox"/> | <b>ŽELIM/CONSENT</b>           |
| <input type="checkbox"/> | <b>NE ŽELIM/DO NOT CONSENT</b> |

da mi veleposlaništvo na mojo elektronsko pošto pošilja obvestila do odjave od obvestil (that the Embassy of the Republic of Slovenia can send me notifications to my e.mail until I unsubscribe).

Podpis (signature):

|                  |  |  |
|------------------|--|--|
| Datum<br>(Date): |  |  |
|------------------|--|--|