

Please complete only the LATVIAN language form.  
This English version is provided solely as a translated sample.

TO THE OFFICE OF CITIZENSHIP AND MIGRATION AFFAIRS OF THE  
MINISTRY OF INTERNAL AFFAIRS OF THE REPUBLIC OF LATVIA

Riga 1 Division  
division

YOUR NAME, SURNAME  
(name, surname)

YOUR PERSONAL CODE IN LATVIA or DATE OF BIRTH  
(personal code)

YOUR HOME ADDRESS IN LATVIA  
(address)

YOUR PHONE NUMBER  
(phone)

APPLICATION

This is to certify that I submit my documents for requesting Residence Permit and making the decision within **30/10/5** day period.

Documents attached:

Choose one (30 or 10 or 5)  
according to the fee you  
made

1. Invitation number
2. RP application form + photo
3. Passport copy;
4. Bank statement;
5. Police clearance certificate; **If you are extending your studies for a semester, please delete this.**
6. Study agreement;
7. Rental agreement;

Payment of the state fee for the checking of documents has been made on \_\_\_\_\_.  
(date)

Please send the Residence Permit registration decision to email:  
asd\_imigracija@rtu.lv, + **YOUR E-MAIL**

I would like to receive a document certifying the right of residence (Residence Permit) in the Riga Division 1 of the Office of Citizenship and Migration Affairs.

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(signature)