



FAMILY SEARCH REQUEST FORM

Udug Association & Somali Community in collaboration with the Somali Embassy in Belgium and Somali Government.

SECTION A: APPLICANT INFORMATION

1. Full Name: _____
2. Date of Birth: ____ / ____ / ____
3. Place of Birth (City/Town, Region): _____
4. Trip/Case Name (if applicable): _____
5. Nationality: _____

SECTION B: FAMILY INFORMATION

6. Mother's Full Name: _____
7. Father's Full Name: _____
8. Last Known City/Location of Family in Somalia: _____
9. Last Time and Place You Saw Them: _____
10. Additional Information (Relatives, Friends, Clan, Contact Numbers etc.):

SECTION C: CONSENT & DECLARATION

I hereby give Udug Association, the Somali Community, and the Somali Embassy in Belgium full permission to use my personal information solely for the purpose of searching and contacting my family members in Somalia. I understand that my data will be handled confidentially and in compliance with data protection laws.

Signature: _____

Date: ____ / ____ / ____



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SECTION D: FOR OFFICIAL USE ONLY

Name of Organization/Individual Conducting Search: _____

Search Conducted By (Name): _____

Contact Method Used to Reach Family:

- ☐ Phone

- ☐ Email

- ☐ In-Person Visit

- ☐ Other: _____

Date Contacted: ____ / ____ / ____

Contact Person in Somalia (if applicable): _____

Notes/Outcome:

