

JAMHURI YA MUUNGANO WA TANZANIA
THE UNITED REPUBLIC OF TANZANIA
WIZARA YA AFYA, MAENDELEO YA JAMII, JINSIA, WAZEE NA WATOTO
MINISTRY OF HEALTH, COMMUNITY DEVELOPMENT, GENDER, ELDERLY AND CHILDREN



FOMU YA MAOMBI YA KUBADILI CHETI CHA CHANJO CHA KIMATAIFA
FORM FOR REPLACEMENT OF YELLOW FEVER VACCINATION CARD

Jina la Kituo
Name of Centre

Tarehe
Date

Na. ya fomu
Serial No.

A. Taarifa binafsi za mwombaji

Applicant's personal information

1. Jina la mwombaji Name of applicant	Jina la kwanza First Name	Jina la kati Middle Name	Jina la ukoo Surname
2. Jinsia (Me/Ke) Sex (M/F)	3. Tarehe ya Kuzaliwa Date of birth	4. Uraia Nationality	
5. Namba ya Hati ya kusafiria Passport number	6. Na. ya kitambulisho cha Taifa/Kura ID number		
7. Je wewe ni msafiri wa mara kwa mara? Ndio / Hapana Are you a frequently traveler? Yes / No	8. Namba ya simu Applicant's Mobile. Number.		

B. Taarifa za cheti za zamani

Information of old certificate

9. Je ulichanja? Ndio/Hapana Were you vaccinated? Yes/No	10. Kama Ndio, cheti kilitolewa kituo gani? Where was the certificate issued?	11. Tarehe ya kuchanja Date of vaccination
12. Namba ya cheti kipya kilichopotea Number of lost new certificate	13. Saini ya mteja Applicant's signature	14. Tarehe Date

C. Matumizi ya ofisi tu (For Official use only)

15. Je, mteja anastahili kupata cheti kipya? Does the applicant deserve to be given a new certificates?	Ndio Yes Hapana No	
16. Sababu za kutopewa cheti Reasons for decline		
17. Nambari ya cheti kipya ICVP serial number		
18. Jina la aliyetoa cheti Name of issuing officer	19. Cheo Title	20. Saini Signature
21. Tarehe Date		