

To avoid delay, answers to all relevant sections should be completed in ink.

Please fill out the form in **BLOCK CAPITALS**.

NOTE: Do not sign this form until you have read all notes on page 1.

PASSPORT NUMBER

APPLICATION NO

SIGNATURE

PHOTO

Application for Adult []

Application for Child under Age 16 []

1	Surname <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss		Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Legally Separated	
	Christian Names:			
	Maiden Name: (if applicant is a woman who is or has been married)		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
	Has name been changed otherwise than by marriage? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, state original name		PERSONAL DESCRIPTION	
	Age last birthday	Place and country of birth		
	Occupation:		Height: Feet	Inches
	Present address:		Colour of eyes	
	Usual place of residence:		Colour of hair	
Contact numbers:		Special peculiarities (visible):		

2 **CITIZENSHIP**

Citizen of St. Kitts and Nevis by Birth Descent Marriage Residence Registration Investment

If born in St. Kitts Nevis Birth Certificate no. Parish

If born outside of St. Kitts and Nevis, particulars of Certificate of Citizenship/Registration

Number of Certificate Date of Issue

3 **PERSONS WHO ARE CITIZENS OF SAINT CHRISTOPHER (ST. KITTS) AND NEVIS BY DESCENT**

Name of parent/grandparent that was born in St. Kitts and Nevis

Place of Birth Date of Birth

4 **PERSONS WHO ARE CITIZENS OF SAINT CHRISTOPHER (ST. KITTS) AND NEVIS BY MARRIAGE ONLY**

Name of Spouse Place of Birth

If spouse was born outside of the Federation, Certificate of Citizenship number:

Place of Marriage Date of Marriage

5	CHILDREN UNDER 16 (if to be included in passport upon initial application)				
	Christian Names	Surname	Place and Country of Birth	Date of Birth	Gender and Relationship to Applicant

6 PASSPORT REQUIRED FOR TRAVELLING TO

.....

PURPOSE OF TRAVEL

7 THIS SECTION IS TO BE COMPLETED BY THE PARENT OR LEGAL GUARDIAN OF A CHILD UNDER AGE 16

DECLARATION

I, _____ the undersigned, hereby apply for the issue of a passport to the above-named child. I declare that the information given in this application is correct to the best of my knowledge and belief, and that the child has not lost the status of Citizen of Saint Christopher (St. Kitts) and Nevis.

I further declare (*cross out "A" or "B", whichever does not apply*):

A - that the child has not previously held or applied for a passport of any description;

B - that all previous passports granted to the child have been surrendered, other than passport or travel document No..... which is now attached, and that no other application for a passport has been made since the attached passport or travel document was issued to him/her.

Name Relationship to Child

Signed Date

NOTE: If the child has had a passport which has been lost, cross out A and B and complete Section 10

8 THIS SECTION IS TO BE COMPLETED BY APPLICANT OVER AGE 16

I, the undersigned, declare that the information given in the application is correct and

a. that I have not lost the status of Citizenship of Saint Christopher (St. Kitts) and Nevis

b. that I have not previously held or applied for any passport or

c. that all previous passports granted to me have been cancelled other than passport no. which is now attached and that I have not made no other application for a passport since the attached passport was issued to me.

Signature Date

THIS SECTION IS TO BE NOTARIZED

Notarize Here

9	<p>Recommender</p> <p>I certify that the applicant is known to me personally and that to the best of my knowledge and belief, the facts stated on this form are correct. I have known the applicant for years.</p> <p>Signature</p> <p>Full name</p> <p>Occupation</p> <p>Address</p> <p>Date</p> <p>IMPORTANT:- Applicants and persons who countersign applications (see section 7) are warned that, should any statement made in connection with this applicant prove to be untrue, the consequences to them may be serious.</p>	<p>Official stamp (if any)</p>
10	<p>PARTICULARS OF PREVIOUS PASSPORT WHICH HAS BEEN LOST OR IS NOT AVAILABLE FOR PRESENT USE</p> <p>No. issued at on</p> <p>Bearer's full name at time of issue</p> <p>Circumstances in which passport was lost or destroyed, or other reason for its non-availability:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Place and date of loss</p> <p>What measures were taken at the time to report loss and to obtain recovery?</p> <p>.....</p> <p>.....</p> <p>Has loss been reported to the police?</p> <p>If so, state when and where</p> <p>I certify that the above particulars are correct and undertake in the event of the passport becoming available to return it to the Passport Office, Saint Christopher (St. Kitts) and Nevis, or to a Saint Christopher (St. Kitts) and Nevis Overseas Mission for cancellation.</p> <p>Signature Date</p> <p>(to be signed by parent/guardian for child under age 16)</p>	
11	<p>FOR OFFICIAL USE DOCUMENTS SUBMITTED TO BE NOTED HERE</p> <hr/> <p>SUPPLEMENTARY INFORMATION</p>	