# Application for a St. Vincent and the Grenadines Passport 

## FOR A CHILD UNDER 16 YEARS OF AGE

| Please write child's <br> name here | (Surname) | (Christian Name or other Names) |
| :---: | :--- | :--- |



## NOTES

## HOW TO COMPLETE THE FORM

1. Section $1,3,5$, and 6 of this Form must be completed on behalf of all children.
2. Section 2 must also be completed where applicable.
3. CERTIFICATE OF APPLICATION. The application must be certified by a Magistrate, Justice of the Peace, Marriage Officer, Lawyer, Solicitor, Member of Parliament, Police Officer (Gazetted Rank, from Suprintendent upwards), Physician, Surgeon, Notary Public, giving professional or business address.
4. PHOTOGRAPHS. Two copies of a recent photograph of the child must be included with the application. These must be taken full face without hat and must not be mounted. The size must not be more than $21 / 2$ inches by 2 inches or less than 2 inches by $11 / 2$ inches. The person who certifies the application is also required to endorse the reverse side of one copy with the words: "I certify that this is a true photograph $\qquad$ . " and affix his signature. All photographs included with an application become the property of the Government of St. Vincent and the Grenadines when it is lodged.
5. DOCUMENTS TO BE PRODUCED.
(a) If the child was born in St. Vincent and the Grenadines, child's birth certificate.
(b) If the Child was born outside St. Vincent and the Grenadines of parent(s) who was/were born in St. Vincent and the Grenadines:
(i) Child's Birth Certificate;
(ii) Father's or Mother's Birth Certificate;
(iii) Parents' Marriage Certificate (If applicable).
(c) If citizenship was obtained through registration or naturalisation:
(i) Child's Birth Certificate;
(ii) Father's or Mother's registration or naturalisation document;
(iii) Child's registration or naturalisation document.
6. Children under sixteen (16) years of age may not be granted a passport without the written consent of a parent. Where the child is born out of wedlock the consent of the mother or father is required. Where the court has granted legal custody to any person, that person must consent and produce the Court Order committing the child to that person's custody.
7. A change of name, except in cases of adoption when the original name is not retained, must be supported by the production of evidence showing that a bona fide change has been.

To avoid delay, answers to all relevant sections should be completed in black or blue ink.
Please fill out the form in BLOCK CAPITALS.
NOTE: Do not sign this form until you have read all notes on page 1


| 3 | NATIONAL STATUS <br> Citizen of St. Vincent and the Grenadines by <br> If by naturalisation or registration, state: |
| :---: | :---: |
| 4 | PASSPORT REQUIRED FOR TRAVELLING TO THE FOLLOWING COUNTRIES: <br> Purpose of Travel $\qquad$ |
| 5 | DECLARATION (To be completed and signed by all applicants parents/ legal guardians) <br> 1, 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 St. Vincent and the Grenadines. <br> I further declare (Cross out " $A$ " or " $B$ " whichever does not apply): <br> A. That the child has not previously held or applied for a passport of any description; or <br> B - That all previous passports granted to the child have been surrendered, other than passport on travel document No.. $\qquad$ which is now attached and that I have no other application for a passport since the attached passport or travel document was issued to $h \mathrm{him} / \mathrm{her}$. <br> Signature. $\qquad$ Date $\square$ (DD/MMMY) <br> Telephone Number. $\qquad$ |
|  | NOTE: If the child has had a passport which has been lost, cross out A and B and complete Section 7 . |
| 6 | CERTIFICATION <br> I certify that the applicant has been known personally to me for. $\qquad$ (State period) and that to the best of my knowledge and belief, the facis stated on this form are correct. <br> Signature $\qquad$ <br> Full name $\square$ $L$ 11 11 11 11 $\qquad$ 1 1 1111 11 $\square$ 1.1 $\qquad$ 1 1 1 $\square$ 11 11 $\square$ $\square$ $\square$ $\square$ $\qquad$ $\qquad$ (DD/MMYY) |
|  | IMPORTANT Applicants and persons who countersign application are warned that, should any statement made in connection with this applicant prove to be untrue, the consequences to them may be serious |
|  | FOR OFFICIAL USE DOCUMENTS PRODUCED TO BE NOTED HERE |
|  |  |


| 7 | PARTICULARS OF PREVIOUS PASSPORT WHICH HAS BEEN LOST OR IS NOT AVAILABLE FOR PRESENT USE <br> No. $\qquad$ Place of issue $\qquad$ 1」 Date $\qquad$ (DD/MmMY <br> Bearer's full name at time of issue <br>  <br> Circumstances in which passport was lost or destroyed or other reason for its non-availability: |
| :---: | :---: |
|  | Place of loss $\qquad$ Date of loss 1 $\qquad$ (DD/MMYY) What measures were taken at the time to report loss and to obtain recovery? |
|  | Has loss been reported to the Police? $\qquad$ <br> I certify that the above particulars are correct and undertake in the event of the passsport becoming available to return it to the passport office, St. Vincent and the Grenadines, or to a St. Vincent and the Grenadines mission for cancellation. <br> Signed $\qquad$ |
|  |  |
| 8 | PARENT'S CONSENT <br> I, (name) $\qquad$ the (relationship) $\qquad$ of (name(s)) $\qquad$ hereby give my consent for him/her/them to be issued a passport of $\qquad$ <br> Signed $\qquad$ |
| 9 | SUPPLEMENTARY INFORMATION |
|  | FOR OFFICIALUSE ONLY FISCAL STAMP |
|  | Passport fee paid: \$ $\qquad$ Receipt number: $\qquad$ Date paid: 1 1 $\square$ (DD/MM/YY) <br> Express fee paid: \$ $\qquad$ Receipt number: $\qquad$ Date issued: $\square$ 1 1 $\perp$ (DD/MM/YY) <br> Payment operator: $\qquad$ |

