APPLICATION FOR A GRENADIAN PASSPORT

Please read the following instructions carefully before completing the form.

HOW TO COMPLETE THE FORM

- All relevant sections must be completed by all applicants.
- Answers should be clearly written in the applicant's own handwriting or parent's/guardians in the case of persons under 16 years of age, using pen and block capitals.

SIGNING THE FORM

The Passport Holder must sign the form in the space provided above section 1 and in section 11. For children under 16 yrs. the parent(s) or Guardian(s) must sign section 11 only. Section 12 should be completed by the person verifying the declaration who should be a member of Parliament, Justice of the Peace, Minister of Religion, Medical or Legal Practitioner, Established Civil Servant, Principal and other qualified Teachers, Bank Official, Police Officers from the rank of Inspector or any person of similar standing personally acquainted with the applicant.

A member of the applicant's immediate family is not acceptable as a recommender. The recommender must be a Citizen of Grenada.

DOCUMENTS TO BE PRODUCED

- (A) Any person who surrenders with this application a previous machine readable passport establishing his/her identity and nationality will not normally be required to produce any other documents unless the person's name or status has been changed.
- (B) Males (married or single) and female who have not been married and children should produce birth certificate or certificate of naturalization or registration as a citizen of Grenada as the case may require.
- (C) Married women (including widows and women whose marriage have been terminated) should produce marriage certificate or divorce certificate where applicable.

- (D) If the person has changed his or her name, the registered birth certificate or deed poll recording the change must also be submitted.
- (E) All documents submitted such as birth, marriage, divorce, registration certificates and deed poll must be in its original form with a photo copy.
- **(F) Photographs.** Two copies of a recent photograph (not more than six months) of the applicant or of a child under the age of sixteen (16) must be included with the application. These portraits must be taken full face without hat or head bands, the portrait shall show the applicant looking directly at the camera. It should have appropriate brightness and contrast if in colour, it should show skin tones naturally. The size of the photographs shall not be longer than 45x35mm (1.77x1.38in) nor smaller than 32x26mm (1.26x1.02in) in height and width. The portraits must be printed on normal thin photographic paper and must not be glazed on the reverse side. The recommender is also required to endorse the reverse side of one copy of the portrait with the words: "I certify that this is a true likeness of the holder Mr. /(Mrs./Miss" and add his signature.

All nationals in the Diaspora with a lost damage or stolen passport must make application for replacement at any one of the nearest embassy/consulate/Mission office in the country of residence.

CHILDREN UNDER THE AGE OF 16 YRS. may not be granted a passport without the written consent of the legal guardian i.e. the father, or if the father is dead, the mother or in the case of a child born out of wedlock the mother. If the father and mother are dead, a written consent from the person who has legal custody of the child must be submitted. Proof of legal custody must be submitted

EMERGENCY CONTACT

It is important to provide information on the person who may be contacted in the event of an emergency.

PLEASE PRINT YOUR ANSWERS IN THE SPACES BELOW WHERE APPLICABLE.

Signature of Passport Holder in the middle of the space provided.

Γ	_
X	
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Personal Data						
□ Mr.		Marit	al Status:			
□ Mrs.		□ Sir	igle		□ \	Widowed
□ Miss.		□ Ma	arried		□ F	Re-married
Other		□ Di	vorced			Separated
SURNAME: (in block capitals)						
CHRISTIAN NAME(S):						
MAIDEN NAME:						
MAIDEN NAME: If name has been changed other	r than by marriage	e, state original name.				
	r than by marriage	e, state original name. Place of Birth:		Age last Birthday:	N	ationality:
If name has been changed other		<u> </u>		Age last Birthday:	Na	ationality:
If name has been changed other Date of Birth (dd\mm\yyyyy)		Place of Birth:	Colour of Ey	,		
If name has been changed other Date of Birth (dd\mm\yyyy)	T	Place of Birth:		ves		
If name has been changed other Date of Birth (dd\mm\yyyy) Sex	T	Place of Birth:	Colour of Ey	ves		
If name has been changed other Date of Birth (dd\mm\yyyy) Sex ☐ Male	Heig	Place of Birth: ht ins.		res		
If name has been changed other Date of Birth (dd\mm\yyyy) Sex ☐ Male ☐ Female	Heig ft.	Place of Birth: ht ins.	Colour of Ha	res		cial Peculiarities (Visible)

2. IF MARRIED, DIVORCED, SEPARATED OR WIDOWED GIVE INFORMATION ON SPOUSE OR FOR							FORM	IER SF	POUSE.	
	First Name:	Middle Name:	e Name: Maiden Nar		n Name					
	Date of Marriage		Place of Marriage			Country of Birth Nationality				
	(dd\mm\yyyy)									
	Profession or Occupation					State whether married more than once If more than once, particulars of previous marriage or marriages should be given in Section 10 page 3.				
	Permanent Address									
	Mailing Address									
	Telephone Home:	Business			Fax:			E	-mail	
3.	Particulars of Parents									
	Father First Name	Middle N	Jame Surna	ime			Dat	e of Bii	rth	Place of Birth
	Mother Name First Name	ame Surna	Surname Maiden Name		e Dat	Date of Birth		Place of Birth		
	Place of Marriage Date of Marriage					Country of Marriage				
	Profession						_			
4.	CITIZENSHIP OF PASSPORT HOL	DER								
	Citizen of Grenada by:		□ Na	turalizatio	n		[□ In	vestme	nt
	□ Birth		□ Re	gistration						
	□ Descent									
	If citizen of Grenada by Descent attach investment give particulars of registration	birth certificate on or naturaliza	of parents(s) to e tion certificate ar	establish p nd attach a	arental certifie	claim. If d copy o	citizen of C of same	renada	by natu	uralization, registration or
	Type of Certificate	Certifica	Certificate No. Date			of Issue			Place of Issue	
5.	Person born in any foreign country n	ust complete p	particulars of pa	rent(s)						
	If born in Grenada attach Birth certifica Name:	Place of Birth		Date		Date	e of Birth			
	If Citizen of Grenada by naturalization Registration or Investment	Туре	I of Certificate	Certifica	ate Num	nber	Date of Iss	ue	Place	of Issue
6.	PASSPORT REQUIRED FOR TRAV	/ELLING TO:	:							
	PURPOSE OF TRAVEL:									

7.	Particulars of previous passport which has been lost or is not available for present use. NOTE: A police report must be submitted with the application, together with proof of citizenship.									
	Passport Number Date of Issue (c		(dd\mm\yyyy)	Place	Place of Issue					
	Bearer's full name at time of issue		Place of loss	•	Date of loss (dd\mm\yyyy)					
	What measures were taken a	What measures were taken at time to report loss and to obtain recovery?								
	How did lost occur?	How did lost occur?								
	Has loss been reported to the Police? (If yes, attach copy of police report)									
8.	CONTACT IN CASE OF I	EMERGENCY								
	Surname:		Christian Name(s)		Telephone					
					Fax					
					E-mail					
	Address:									
	Relationship:									
9.	PARENT'S CONSENT (Se	ee note on page 1)								
	I (name)			the (relations	hip)					
	of name(s) for him/her to hold a passpor				hereby give my consent					
			Si	gnature						
10.										
11.	DECLARATION OF APPLICANT OR DECLARATION ON BEHALF OF CHILD UNDER THE AGE OF 16 YEARS WHERE APPLICABLE									
	_	C	the application is correct to the be	st of my knowledge and	d belief, and					
	B That I have not lost the status of citizen of Grenada.									
	Choose C, D or E whichever is applicable C									
	E That I have lost the	e previous passport.								
	I certify that I have read and understood all the questions set forth in this application and the answers that I have furnished on this form are true and correct to the best of my knowledge and belief. I understand that any false, incomplete of misleading information may result in delays in the issuance of a passport and can lead to having criminal proceedings taken against me. I understand that a passport is the property of the Government of Grenada and can be recalled at any time.									
	Signature:			Date						
	Relationship of applicant to passport holder:									

12.	DECLARATION OF RECO	OMMENDER								
	I (name in capitals)									
	Thisday of									
	ř		-							
	Telephone No:		Address:							
FOR O	FFICIAL USE ONLY									
			PRODUCED TO BE NOTED							
Applica	nt's Birth Certificate	Previous Passport	Parent(s) Birth Certificate where applicable	Marriage Certificate		Affidavit where necessary				
Divorce Certificate		Registration, Investment or Naturalization Certificate	Letter of Consent	Deed Poll		Photos				
OTHER	DOCUMENTS			1						
PLACE	WHERE APPLICATION W	AS RECEIVED:								
St. Geor	ge's, Grenville, Carriacou, Go	uyave, New York, Washington,	London, Canada, Venezuela,	Trinidad, Othe	er specify ()			
Receipt	No									
Applica	tion Received by		Date			Amount				
Checked and Approved by			Date		of Fees Paid					
Supervised by			Date	. Date		Passport:				
Passpor	t No				Emergency					
Date Iss	ued				Service:					
Date Ex	pired		Express							
Authority Signature				Service:						
					Total:					
DISTR	IBUTION									
Delivere	ed to		Date							
Delivere	ed by		Date							