

<input type="checkbox"/> New Application <input type="checkbox"/> Replacement Passport <input type="checkbox"/> Renewal	FOR OFFICIAL USE DO NOT WRITE IN THIS BOX BARCODE	CHILD <input type="checkbox"/> ADULT <input type="checkbox"/>
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Please write your name here	(Surname)	(Christian Names)
National Insurance Number		

FORM "A"
APPLICATION FOR A SAINT LUCIA PASSPORT
IMPORTANT. Read instructions carefully before completing the form
INSTRUCTIONS

(A) SECTIONS OF FORM TO BE COMPLETED

- Section 1&2** - All Applicants (where applicable)
- Section 3 (a)** - Married women (widow/divorce)
- Section 3 (b)** - Women who are citizens of St. Lucia by naturalization
- Section 4**-All applicants (if applicable)
- Section 5**-All applicants (if applicable)
- Section 6**- All applicants (parent / guardian, if under 16)
- Section 7**-First time applicants and replacements
- Section 8**-Application for Replacements only
- Section 9**- For parents/guardians of children who have not attained the age of 18 years

N.B. In the case of a guardian, a statutory declaration is required.

(B) SIGNING THE FORM

- Section 6**— Signature of applicant, if 16 years and over or that of parent/guardian, if under 16 years.
- Section 7**— Should be completed and signed by the person verifying the applicant's declaration and should be a prominent person in the society such as a doctor, lawyer, minister of religion or justice of the peace.

N.B. Family members are not acceptable recommenders.

Recommendations from members or officials of firms should bear the printed stamp of the firm. The recommender should certify on the reverse side of one photograph that it is a true likeness of the applicant.

Recommenders are reminded of section 5 (1) and (2) of the Passport Amendment Act No. 23 of 2003.

- **A first applicant is (18 years & over) required to pay for his/her application in person and attend an interview with the Immigration Department.**

(C) DOCUMENTS TO BE PRODUCED

Any applicant who surrenders with this application a previous Saint Lucia passport, which was issued in Saint Lucia, **WILL NOT NORMALLY** be required to produce any other documents unless;

- the information on the passport is not legible
- The applicant's name or status has been changed

However, if passport was issued overseas, applicant would be required to produce documents as required by first time applicants.

C (a) FIRST TIME APPLICANTS

- Birth certificate
- Change of name document (if applicable)
- Marriage certificate (women only and if applicable)
- Divorce certificate (women only and if applicable)
- St. Lucia Citizenship document (if born overseas)
- Death certificate (widow)
- National identification card

N.B in all cases only ORIGINAL documents or certified copies will be accepted.

(D) FOREIGN LANGUAGES

In cases where the original document is of a foreign language, an English translation of that document by a recognized translator along with the original or a certified copy **must be** produced.

(E) Replacement Passports

Applicants would be required to provide, a written statement detailing the reason/s for wanting the passport replaced. Supporting documents (e.g. fire or police report) from the appropriate authority would also be required.

(F) Children

Note — Where an Order or direction has been made by the High Court or in Chambers or by a magistrate regarding the custody of a child, such Order must be produced or the nature of the direction stated.

PHOTOGRAPHS

(G) Two (2) passport size copies of a recent photograph of the applicant must be included with the application. These photographs must be taken full face without hat . Only prescription glasses will be accepted.

(H) COLLECTION OF PASSPORTS (Sec. 5)

Applicants are required to provide the name of an individual whom they may wish to collect the passport on their behalf. The individual who must be at least 18 years old, would be required to produce his/her National Identification card upon collection.

N.B. THE IMMIGRATION HEAD-OFFICE RESERVES THE RIGHT TO REQUEST ADDITIONAL SUPPORTING DOCUMENTS AND/ OR REQUIRE AN APPLICANT TO ATTEND ONE OR MORE INTERVIEWS BEFORE ISSUING A PASSPORT

(I) Receipts must be produced upon collection of passports.

N.B CHILDREN WILL NOT BE INCLUDED ON PARENT(S) PASSPORTS.

NB: ALL APPLICANTS CAPABLE OF SIGNING SHOULD PROVIDE SPECIMEN SIGNATURE AT SECTION 10

I Surname (in block capitals)		State whether <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	
Christian Names (in full) (in block letters)		Married <input type="checkbox"/>	
Maiden Name (If applicant is a woman who is or has been married)		Single <input type="checkbox"/>	
		Divorced <input type="checkbox"/>	
Has name been changed If so, state original name (otherwise than by marriage?)		PERSONAL DESCRIPTION	
		Height	Metres
Country of Birth	Date of Birth (dd/mm/yy)		Colour of eyes
			Colour of Hair
Profession or Occupation		Special Peculiarities	
Local Address (in block letters)	Foreign Address (if applicable) (in block letters)		Tel No. (h) Mobile :
		Tel No. (w)	
E-Mail Address(es)			
2 CITIZENSHIP: State whether citizen of Saint Lucia by birth naturalization or registration		Citizen of Saint Lucia by:	
If citizen of St. Lucia by registration or naturalization give particulars of registration or naturalization certificate	Certificate Number	Place of issue	Date of issue(dd/mm/yy)
3 MARRIED WOMEN applying for a passport must complete (a) and where applicable (b)			
(a) Husband or former husband(s) Surname		Christian Name(s)	
Surname and full Christian names			
Place of marriage		Date of marriage (dd/mm/yy)	
		Husband or former husband(s) nationality	
b) Women who are citizens of Saint Lucia by naturalization only			
Particulars of husband or former husband(s)	Husband's place and date of birth	If husband was born in a foreign country give place and date of his father's birth	
State whether married more than once State Yes or No			
4 A. If applicant's birth was registered as a citizen of Saint Lucia abroad state:			
Name of Consulate	Date of Registration	Place and date of parent's birth	
B. Particulars of applicant's parent:			
(a) Name.....			
(b) District (if born in Saint Lucia) Date of birth.....			
(c) (If citizen of Saint Lucia by naturalization or registration) -			
Certificate No..... Date and Place of issue.....			
5. Please enter the name of an individual whom you may wish to collect passport on your behalf.			
Name:		NIS #:	
Address:		Telephone Number(s):	
Cellular Number(s):		Relationship	

6 DECLARATION

- A** I declare that the information given in the application is correct to the best of my knowledge and belief, and
- B** That I have not lost the status of Citizen of Saint Lucia, and
- C** That I have not previously held or applied for any passport whatever,
- or **D** That all previous passports granted to me have been surrendered other than passport or travel document No. which is now attached and that I have made no other application for a passport since the attached passport or travel document was issued to me.

Signature: Date:

Note:— If you have had a passport which has been lost, delete C and D and complete Section 8 on page 3 of this form.

7 RECOMMENDER (for first applicant and replacement passports)

I, (name in block capitals)
certify that the applicant has been known personally to me for years, and that to the best of my knowledge of him/her, I believe the facts stated on this form are correct, and that he/she is a fit and proper person to receive a passport.

Address Signature

..... Profession

..... Date

IMPORTANT: Applicants and recommenders (section 6 & 7) are warned that should any statement contained in their respective declarations prove untrue, the consequences to them may be serious. The attention of persons who are asked to sign this declaration is specially called to the fact that it can only be signed from **personal knowledge** of the applicant and not from Information obtained from other persons. See Section 5(1) & (2) of the Passport Amendment Act No. 23 of 2003.

8 PARTICULARS OF PREVIOUS PASSPORT WHICH HAS BEEN LOST OR IS NOT AVAILABLE FOR PRESENT USE

No. Issued at on

Bearer's names

Circumstances in which passport was lost or destroyed, or other reason for its non-availability.
.....

Place and date of loss

What measures were taken at the time to report loss and to obtain recovery?
.....

Has loss been reported to the Police?

If yes, address of station

I certify that the above particulars are correct and undertake in the event of the passport coming again into my possession to return it to the Saint Lucia Passport Office or to a Saint Lucian High Commission.

Date Signed

9 PARENT'S / LEGAL GUARDIAN'S CONSENT

(For applicants over 16 & under 18 years)

I (name) the (relationship)

of name (s) hereby give my consent

for him/her/ (a) to hold a passport,

Signature

DO NOT WRITE IN THIS AREA

FOR OFFICIAL USE

(Documents produced to be noted here)

Applicant's Birth Certificate No.	Marriage Certificate No.	Divorce Decree No.	Deed Poll No.	Citizen Certificate No.	Previous Passport No.	Foreign Passports No.

Any other documents to be noted here:.....
.....
.....

PAYMENT DETAILS

Date paid	Amount paid	Receipt Number

INFORMATION ON PASSPORT TO BE ISSUED

New passport Number..... Date of Issue

INTERVIEWER

Name.....

Date of Interview

SECTION 10

Applicants Photograph



Specimen Signature of Applicant

