

<p>To avoid delay answers to relevant sections should be completed in black or blue ink.</p> <p><b>Please fill out the form in BLOCK CAPITALS.</b></p> <p><b>NOTE:</b> Do not sign this form until you have read all notes on page 1.</p>	1	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>a) Applicant's Signature:</b></p> <p>Please sign below within the area bounded by the marks.</p> <div style="border: 1px solid black; height: 100px; margin-top: 10px;"></div> </div> <div style="width: 35%;"> <p><b>b) Applicants Photograph:</b></p> <p>Supplied photos must cover the marks below.</p> <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div> </div> </div> <div style="margin-top: 20px;"> <p><b>b) Application for:</b></p> <p><input type="checkbox"/> Adult</p> <p><input type="checkbox"/> Child under Age 16</p> </div>
<p><b>FOR OFFICIAL USE ONLY</b></p> <div style="border: 1px solid black; height: 30px; margin-bottom: 10px;"></div> <p style="text-align: center;">Application Number</p> <div style="border: 1px solid black; height: 30px; margin-bottom: 10px;"></div> <p style="text-align: center;">Passport Number</p>		

2	<p>Surname <span style="float: right;"><input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss</span></p> <p>Given Names:</p> <p>Maiden Name: (if applicant is a woman who is or has been married)</p> <p>Has name been changed otherwise than by marriage? <span style="float: right;"><input type="checkbox"/> No <input type="checkbox"/> Yes</span> If so, state original name</p>	<p>Status: <span style="float: right;"><input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Legally Separated</span></p> <p>Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female</p>																		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Age last birthday</td> <td style="width: 30%;">Place and country of birth</td> <td style="width: 15%;">Date of Birth</td> <td style="width: 40%;">Height: <span style="float: right;">Feet      Inches</span></td> </tr> <tr> <td colspan="3">Occupation:</td> <td>Colour of eyes</td> </tr> <tr> <td colspan="3">Present address:</td> <td>Colour of hair</td> </tr> <tr> <td colspan="3">Usual place of residence:</td> <td rowspan="2">Special peculiarities (visible):</td> </tr> <tr> <td colspan="3">Contact numbers:</td> </tr> </table>	Age last birthday	Place and country of birth	Date of Birth	Height: <span style="float: right;">Feet      Inches</span>	Occupation:			Colour of eyes	Present address:			Colour of hair	Usual place of residence:			Special peculiarities (visible):	Contact numbers:		
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3	<p><b>CITIZENSHIP</b></p> <hr/> <p>Citizen of St. Kitts and Nevis by <span style="float: right;"><input type="checkbox"/> Birth <input type="checkbox"/> Descent <input type="checkbox"/> Marriage <input type="checkbox"/> Residence <input type="checkbox"/> Registration <input type="checkbox"/> Investment</span></p> <hr/> <p>If born in <input type="checkbox"/> St. Kitts <input type="checkbox"/> Nevis      Birth Certificate no. .... Parish .....</p> <hr/> <p><b>If born outside of St. Kitts and Nevis, particulars of Certificate of Citizenship/Registration</b></p> <p>Number of Certificate ..... Date of Issue .....</p>
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<b>4</b>	<b>PERSONS WHO ARE CITIZENS OF SAINT CHRISTOPHER (ST. KITTS) AND NEVIS BY DESCENT</b>  Name of parent/grandparent that was born in St. Kitts and Nevis .....  Place of Birth ..... Date of Birth .....
<b>5</b>	<b>PERSONS WHO ARE CITIZENS OF SAINT CHRISTOPHER (ST. KITTS) AND NEVIS BY MARRIAGE ONLY</b>  Name of Spouse ..... Place of Birth .....  If spouse was born outside of the Federation, Certificate of Citizenship number: .....  Place of Marriage ..... Date of Marriage .....
<b>6</b>	<b>PASSPORT REQUIRED FOR TRAVELLING TO .....</b>  .....  <b>PURPOSE OF TRAVEL .....</b>  .....
<b>7</b>	<b>THIS SECTION IS TO BE COMPLETED BY THE PARENT OR LEGAL GUARDIAN OF A CHILD UNDER AGE 16</b>  <b>DECLARATION</b>  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 ( <i>cross out "A" or "B", whichever does not apply</i> ): 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 the Passport Recovery Form
<b>8</b>	<b>THIS SECTION IS TO BE COMPLETED BY APPLICANT OVER AGE 16</b>  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 any other application for a passport since the attached passport was issued to me. d. that I understand that knowingly making a false statement in this application is an offence contrary to section 10 of the Passports and Travel Documents Act  Signature ..... Date .....

9	<b>Recommender</b> 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.  Signature ..... Full name ..... Occupation ..... Address ..... Date .....  <b>IMPORTANT:-</b> 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.		Official stamp     				
10	<table border="1" style="width: 100%;"> <tr> <td style="width: 30%; vertical-align: top;">FOR OFFICIAL USE</td> <td style="vertical-align: top;">DOCUMENTS SUBMITTED TO BE NOTED HERE</td> </tr> <tr> <td colspan="2" style="height: 150px; vertical-align: top;">SUPPLEMENTARY INFORMATION</td> </tr> </table>			FOR OFFICIAL USE	DOCUMENTS SUBMITTED TO BE NOTED HERE	SUPPLEMENTARY INFORMATION	
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