



FORM A

**COMMONWEALTH OF DOMINICA
APPLICATION FOR A PASSPORT AND INSTRUCTIONS ON HOW TO COMPLETE**

<i>(Surname)</i>		<i>(Maiden name)</i>
<i>(First name)</i>	<i>Second name)</i>	<i>(Third name)</i>

IMPORTANT: Read instructions carefully before completing the form. Note: Amendments cannot be made to Passports

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 and the nature of the direction stated.

(A) All applicants (Male or Female) must complete Sections 1, 2, and 7, and if applicable, Section 4.

(B) Married women (including widows and women whose marriages have been dissolved) must also, in addition to (A) above, complete Section 3.

(C) A passport application for a child under 16 years, must be made by or with the **notarized consent** of the parent, adoptive parent or Legal Guardian by completing Sections 1, 2, 6, and 7, if applicable Section 4.

(D) **Signing the form.** The applicant must sign **section 7 and signature box**. Children 10 years and above must sign signature box. (Signature box **must not** be signed on behalf of children). **Thumb prints** will be taken for adults unable to sign.

(E) **Recommender:** Section 8 should be completed by the person (the recommender) verifying the declaration who must be a member of Parliament, a Mayor or City Councillor or Village Council Chairperson, Justice of the Peace, Minister of Religion, Staff Nurse and above, Medical or Legal Practitioner, Established Civil Servant (Executive Officer and above), Senior Bank Official, Police Officer of the rank of Sergeant and above, Qualified Teacher and above, Custom Officer Grade 1 and above, Principal Prison Officer and above, business manager or any person of similar standing personally acquainted with the applicant.

The recommender must be a citizen of the Commonwealth of Dominica who knows the applicant for two (2) years or more, but must not be a member of the applicant's immediate family.

The recommender is also required to endorse the reverse side of one of the photograph with the words:

"I certify that this is a true likeness of Mr., Mrs. or Miss " and add his signature

Passport Fees are paid at the **Government Treasury** and receipts submitted with application form.

16 years and above - \$100.00. Under 16 years - \$50.00.

Lost, Stolen, Damaged Passports must be reported immediately to the nearest Police Station or Dominican Consulate/ High Commission and the Immigration Office, Roseau (Tel.# **1 767 266 5139**). A new passport will only be issued **after exhaustive inquiries**. Applicant will then be given a form to pay a **penalty fee of \$400.00**, which is in addition to the application fee. A Statutory Declaration will also be requested.

DOCUMENTS TO BE PRODUCED

All documents must be produced in duplicate (**Original and Photocopy**) or a Certified Copy.

Documents in **Foreign Languages** must be accompanied by an **English translation**.

(F) (i) Citizens by birth (married or single) should produce a Computerized Birth Certificate and previous passport. Certificate of Naturalization or Registration as a citizen of Dominica, or Adoption Order which must be accompanied by a Birth Certificate showing particulars of the Order, as the case may require.

(ii) Married women (including widows and women whose marriage have been terminated) should produce documents specified in (i) above, together with marriage certificate, Decree Absolute or Certificate of Annulment.

(iv) **Change of Name.** An applicant, who has changed his or her name, must submit the **Deed Poll** and a Birth Certificate showing such change and particulars of the Deed Poll.

(v) Persons born outside the Commonwealth of Dominica as constituted on 3rd November, 1978 and all persons claiming Citizenship by descent, naturalization or registration must complete Section 4B and produced documentary evidence in support of the statement made therein. e.g. birth certificate of descent (father / mother), naturalization or registration document, or other evidence of citizenship.

Persons born outside the Commonwealth of Dominica before 3rd November, 1978 in a place which was not British Protected and claiming citizenship by descent must apply for citizenship at the Ministry of National Security, Labour & Immigration.

Persons living overseas may apply through the nearest Dominican High Commission/Consulate, or may send completed application to a relative or friend who can submit it on their behalf.

First Time Applications: First time applicants must present themselves to the Immigration Department or the nearest Dominican High Commission/Consulate. Children under 16 yrs must be presented by the applicant, who must present an ID.

PHOTOGRAPHS

The photos shall not be more than six months old and shall be 45mm in height x 38 mm in width or (1 ¾" x 1 ½"). The image shall be 3 to 5mm from the top edge and 10 to 12mm from the bottom edge and show a close-up of the applicant's head and the top of the shoulders. The face shall look directly at the camera with both ears showing and shall take up 70-80 percent of the vertical dimension of the picture.

Photos should be printed on high quality paper with high resolution. Photo should neither be **over exposed** nor **under exposed**. No shadows. Back ground colours should be White, Light Grey, Light Blue, Light Brown, Beige. There must be **contrast** between image and background, eg. No white shirt on white background etc. **No sleeveless or Tank tops.** Chest area must be covered. **No Bold prints, or military shirts or camouflage.** **No Shades or Sun glasses, No light reflections on glasses.** **No head covering except in case of Muslims.** Facial expression must be neutral. (Person may smile but mouth must not be open)

COLLECTING OF PASSPORTS

Persons collecting passports **must present a photo ID. (Drivers license, Social Security Card)**. New passport may be used, if person is collecting his/ her own passport.

A person who submitted a passport application on behalf of an applicant, must submit **an Order** from the applicant authorizing that person to collect the passport on their behalf. The **Order** must be **notarized** if the applicant is overseas.

The passport processing time is two (2) weeks. However, in case of death in the family or emergency medical treatment overseas, persons can be facilitated.

FOR OFFICIAL USE ONLY

Application #

.....
NEW PASSPORT NUMBER

DATE OF ISSUE/...../.....

NOTE: Please read instructions before completing this application form.

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

To avoid delay, answers to all relevant sections should be completed in ink. (**Dark Blue or Black ink**)



PHOTO

Signature Box (Use only Dark Blue or Black ink)

1	Surname (state whether Mr., Mrs., Miss, Sr., Fr., Rev. or Dr.):			Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed	
	Christian names (or other names):				
	Maiden Surname: (if applicant is woman who is or has been married)				
	Has name been changed otherwise than by marriage? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, state original name			PERSONAL DESCRIPTION	
	Nicknames/ Aliases:				
	Age at last birthday	Place of Birth	Date of birth (day/mm/year) / /	Height: Feet Inches	
	Profession or occupation:			Colour of hair	
	Present address:			Colour of eyes	
	Usual place of residence:			Special peculiars (visible):	
	Local telephone no.:	Fax no.:	E-mail:		

2	CITIZENSHIP State whether Citizenship of the Commonwealth of Dominica by: <input type="checkbox"/> Birth <input type="checkbox"/> Descent <input type="checkbox"/> Naturalisation <input type="checkbox"/> Registration <input type="checkbox"/> Adoption			
	If Citizen of the Commonwealth of Dominica by Naturalization, Registration or Adoption, give particulars Certificates	Number of Certificate	Place of Issue	Date of Issue / /

3	MARRIED WOMEN applying for a passport must complete this section.	
	Husband's or former husband's Surname and full Christian names: Surname:	Christian names:
	Place of marriage	Date of marriage (day/mm/year) / /

4	PERSONS BORN ABROAD Persons born in (A) any British Commonwealth country or in Southern Ireland in British protectorate, protected state or mandated or trust or (B) in any foreign country must complete A or B below:	
	A – If applicant's birth was registered as a Citizen of the Commonwealth of Dominica abroad, state:	
	Name of consulate	Place and date of father's/ Mother's birth (day/mm/year) / /
	Date of registration (day/mm/year) / /	
B – Particulars of applicant's Father/ Mother		
(a) If born in the Commonwealth of Dominica		
Name:	Place of birth: Date of birth: / /	
(b) If Citizen of the Commonwealth of Dominica by Naturalisation or Registration		
No. of Certificate:	Place of issue: Date of issue: / /	

5 CHILDREN UNDER 16 (if to be included in the passport)					
Christian names in full	Surname	Place of birth	Date of birth (dd/mm/year)	Gender	Relationship to applicant

6 To Chief Passport Officer
 This is to certify that, I, am the legal guardian of
 (name in full)

 I hereby authorize you to issue him/her with a passport of the Commonwealth of Dominica.
 Signature Relationship of Applicant to child
 (parent / guardian)

7 DECLARATION (*cross out whichever does not apply*)
A - I, the undersigned, hereby apply for the issue of a passport to the above named child.
B - I declare that the information given in this application is correct to the best of my knowledge and belief, and
C - That (I have or) the child has not lost the status of Citizen of the Commonwealth of Dominica.
D - That (I have or) the child has not previously held or applied for a passport whatever;
or E - That all previous passports granted to (me or) the child have been surrendered, other than passport on 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 or stolen, cross out D and E and complete Section 9 of this form.

8 Recommender: I, declare that to the best of my
 (Name in full)
 personal knowledge and belief, the above-made declarations and description of the said Mr./Mrs./Miss.....
 are true, and that I can from my *personal knowledge* of him/her vouch him/her as a fit and proper person to receive a passport.
 I have known the **applicant** for _____ years. I am a citizen of the Commonwealth of Dominica.
 Signature Date
 Profession
 Address
 Office Stamp (if any)

IMPORTANT: Applicant and recommender (See Section 9) **are warned** that should any statement contained in their respective declarations prove to be 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 must be signed from *personal knowledge* of the applicant and not from information obtained from other persons, and should know the applicant for **at least two (2) years**.

9

PARTICULARS OF PREVIOUS PASSPORT WHICH HAS BEEN LOST, STOLEN OR IS NOT AVAILABLE FOR PRESENT USE (Attach additional sheets if necessary)

Passport No. issued at on

Bearer's full name at time of issue

Circumstances in which passport was lost, stolen 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 police?

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 Passport Office.

Date Signed

SUPPLEMENTARY INFORMATION (Attach additional sheets if necessary)

.....
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.....
.....
.....

Submitted By:.....

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DOCUMENTS PRODUCED TO BE NOTED HERE

Applicant's birth certificate	Child's / children's birth certificate	Marriage certificate	Other documents
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If, pending divorce proceedings, any judicial order or direction made regarding the custody of any child whose name is to be included in the passport, state nature of the order or direction in supplementary information.

OFFICE STAMP

Passport fee \$ Penalty Fee \$.....

Receipt # Penalty Fee Receipt #.

Received by:
(full name rank and number)

Checked by
(signature)

Passport signed by:
(signature)