



**CARIBBEAN COMMUNITY (MOVEMENT OF SKILLED NATIONALS) ACT**  
Cap. 186A

**APPLICATION FORM FOR INDEFINITE STAY**

**INSTRUCTIONS**

*Where applicable, please attach the following with the application form:*

- **Passport (copy of bio-data in passport and date of issue and expiry date of passport)**
- **Passport (copy of bio-data in passport and date of issue and expiry date of passport) of dependant(s)**
- **Two passport size photographs of applicant (place name of applicant name in block letters at back of photographs)**
- **Two passport size photographs of dependant(s) (place name of dependant name in block letters at back of photographs)**
- **Marriage certificate** \_\_\_\_\_
- **Qualifying certificate**

1. Full name of applicant: Mr./Mrs./Miss \_\_\_\_\_  
*Family Name/First Name/Middle Name(s) (in capitals)*

2. Category of skill:
- |   |                          |
|---|--------------------------|
| Media Person  | <input type="checkbox"/> |
| Artiste   | <input type="checkbox"/> |
| Musician  | <input type="checkbox"/> |
| Artisan   | <input type="checkbox"/> |
| Sports Person   | <input type="checkbox"/> |
| Nurse   | <input type="checkbox"/> |
| Teacher   | <input type="checkbox"/> |
| Household Domestic  | <input type="checkbox"/> |
| Agricultural Worker   | <input type="checkbox"/> |
| Security Guard  | <input type="checkbox"/> |
| Graduate  | <input type="checkbox"/> |
| Holder of an Associate Degree or a Comparable Qualification | <input type="checkbox"/> |

3. Date of birth: \_\_\_\_\_  
*Date/Month/Year*

4. Sex: Male  Female

5. Nationality: \_\_\_\_\_  
*Nationality*

6. Place of birth: \_\_\_\_\_  
*Country*

7. (a) Passport number: \_\_\_\_\_  
*Passport Number*

(b) Expiration date of passport: \_\_\_\_\_  
*Date/Month/Year*

(c) Country which issued passport: \_\_\_\_\_  
*Country*

8. Marital status: \_\_\_\_\_  
*Status*

9. • Current permanent residential address: \_\_\_\_\_  
*Current Permanent Residential Address*

• Where applicable, intended address in Barbados: \_\_\_\_\_  
*Intended Address*

10. Telephone number (local): \_\_\_\_\_  
*Telephone Number*

11. Where applicable, telephone number (overseas): \_\_\_\_\_  
*(Area Code)-Telephone Number*

12. Email address: \_\_\_\_\_  
*Email Address*

13. Where applicable, name of professional agency applicant is registered with and the address and telephone number of the professional agency:

\_\_\_\_\_  
*Name of Agency*

\_\_\_\_\_  
*Address of Agency*

\_\_\_\_\_  
*Telephone Number of Agency*

14. Where applicable, information on dependant(s):

- Full name of dependant: \_\_\_\_\_  
*Family Name/First Name/Middle Name(s) (in capitals)*
- (a) Date of birth: \_\_\_\_\_  
*Date/Month/Year*
- (b) Sex: Male  Female
- (c) Nationality: \_\_\_\_\_  
*Nationality*
- (d) Place of birth: \_\_\_\_\_  
*Country*
- (e) Passport number: \_\_\_\_\_  
*Passport Number*
- (f) Expiration date of passport: \_\_\_\_\_  
*Date/Month/Year*
- (g) Country which issued passport: \_\_\_\_\_  
*Country*
- (h) • Current permanent residential address: \_\_\_\_\_  
\_\_\_\_\_  
*Current Permanent Residential Address*
- Where applicable, intended address in Barbados: \_\_\_\_\_  
\_\_\_\_\_  
*Intended Address*
- (i) • Telephone number (local): \_\_\_\_\_  
*Telephone Number*
- Where applicable, telephone number (overseas): \_\_\_\_\_  
*(Area Code)-Telephone Number*
- (j) Relationship to applicant: \_\_\_\_\_  
*Relationship*

- Full name of dependant: \_\_\_\_\_  
*Family Name/First Name/Middle Name(s) (in capitals)*
- (a) Date of birth: \_\_\_\_\_  
*Date/Month/Year*
- (b) Sex: Male  Female
- (c) Nationality: \_\_\_\_\_  
*Nationality*
- (d) Place of birth: \_\_\_\_\_  
*Country*
- (e) Passport number: \_\_\_\_\_  
*Passport Number*
- (f) Expiration date of passport: \_\_\_\_\_  
*Date/Month/Year*
- (g) Country which issued passport: \_\_\_\_\_  
*Country*
- (h) • Current permanent residential address: \_\_\_\_\_  
  
\_\_\_\_\_ *Current Permanent Residential Address*
- Where applicable, intended address in Barbados: \_\_\_\_\_  
  
\_\_\_\_\_ *Intended Address*
- (i) • Telephone number (local): \_\_\_\_\_  
*Telephone Number*
- Where applicable, telephone number (overseas): \_\_\_\_\_  
*(Area Code)-Telephone Number*
- (j) Relationship to applicant: \_\_\_\_\_  
*Relationship*

- Full name of dependant: \_\_\_\_\_  
*Family Name/First Name/Middle Name(s) (in capitals)*
- (a) Date of birth: \_\_\_\_\_
- (b) Sex: Male  Female
- (c) Nationality: \_\_\_\_\_  
*Nationality*
- (d) Place of birth: \_\_\_\_\_  
*Country*
- (e) Passport number: \_\_\_\_\_  
*Passport Number*
- (f) Expiration date of passport: \_\_\_\_\_  
*Date/Month/Year*
- (g) Country which issued passport: \_\_\_\_\_  
*Country*
- (h) • Current permanent residential address: \_\_\_\_\_  
\_\_\_\_\_  
*Current Permanent Residential Address*
- Where applicable, intended address in Barbados: \_\_\_\_\_  
\_\_\_\_\_  
*Intended Address*
- (i) • Telephone number (local): \_\_\_\_\_  
*Telephone Number*
- Where applicable, telephone number (overseas): \_\_\_\_\_  
*(Area Code)-Telephone Number*
- (j) Relationship to applicant: \_\_\_\_\_  
*Relationship*

- Full name of dependant: \_\_\_\_\_  
*Family Name/First Name/Middle Name(s) (in capitals)*
- (a) Date of birth: \_\_\_\_\_
- (b) Sex: Male  Female
- (c) Nationality: \_\_\_\_\_  
*Nationality*
- (d) Place of birth: \_\_\_\_\_  
*Country*
- (e) Passport number: \_\_\_\_\_  
*Passport Number*
- (f) Expiration date of passport: \_\_\_\_\_  
*Date/Month/Year*
- (g) Country which issued passport: \_\_\_\_\_  
*Country*
- (h) • Current permanent residential address: \_\_\_\_\_  
\_\_\_\_\_  
*Current Permanent Residential Address*
- Where applicable, intended address in Barbados: \_\_\_\_\_  
\_\_\_\_\_  
*Intended Address*
- (i) • Telephone number (local): \_\_\_\_\_  
*Telephone Number*
- Where applicable, telephone number (overseas): \_\_\_\_\_  
*(Area Code)-Telephone Number*
- (j) Relationship to applicant: \_\_\_\_\_  
*Relationship*

- Full name of dependant: \_\_\_\_\_  
*Family Name/First Name/Middle Name(s) (in capitals)*
- (a) Date of birth: \_\_\_\_\_
- (b) Sex: Male  Female
- (c) Nationality: \_\_\_\_\_  
*Nationality*
- (d) Place of birth: \_\_\_\_\_  
*Country*
- (e) Passport number: \_\_\_\_\_  
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*Date/Month/Year*
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*Country*
- (h) • Current permanent residential address: \_\_\_\_\_  
\_\_\_\_\_  
*Current Permanent Residential Address*
- Where applicable, intended address in Barbados: \_\_\_\_\_  
\_\_\_\_\_  
*Intended Address*
- (i) • Telephone number (local): \_\_\_\_\_  
*Telephone Number*
- Where applicable, telephone number (overseas): \_\_\_\_\_  
*(Area Code)-Telephone Number*
- (j) Relationship to applicant: \_\_\_\_\_  
*Relationship*



DECLARATION

I \_\_\_\_\_, the applicant, hereby  
*Name of Applicant*

declare that the information I have provided on this form is correct and that the  
qualifying certificate presented was issued to me by the

\_\_\_\_\_  
*Name of Competent Authority/Title of Competent Minister*

of \_\_\_\_\_  
*Member State*

I also understand that Barbados has the right to reject my application for indefinite  
stay if I am found to be undesirable pursuant to Article 226 of the *Revised Treaty  
of Chaguaramas establishing the Caribbean Community including the CARICOM  
Single Market and Economy*.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date/Month/Year*