FORM A

APPLICATION FOR A BARBADOS PASSPORT

for Persons over Sixteen years of age

IMPORTANT: Read instructions carefully before completing this form.

NOTES

4. DOCUMENTS TO BE PRODUCED

(a) If the applicant was born in Barbados – applicant’s Birth Certificate. In cases where the name is not included on Birth Certificate, Baptismal Certificate must also be produced.

(b) Persons born outside Barbados –

It must be noted that anyone born outside of Barbados may not be issued with a Barbados Passport unless he is recognized or registered as a Citizen of Barbados by the Ministry.


(ii) Citizenship by Naturalization or Registration – The appropriate Registration Certificate.

(N.B. – Citizens of Barbados who apply for passports in Barbados must produce the Barbados Identification Card or evidence of registration if the card is not available).

(c) If children under 16 are to be included in a passport, their Birth Certificate must be produced.

(d) All married women must produce their marriage certificates.

(e) Children between the ages of 16 and 18 years of age may not be granted passports without the written consent of the parent except where the person under 18 is married.

Section 9 may be completed in reference to (e) above or a separate letter is acceptable. The relationship to the child should be stated in either case (e.g. father, mother, brother, etc.)

(N.B. – Any person claiming legal custody during the lifetime of the parents, must produce the court order committing the child to that person’s custody).

(f) A change of name other than by marriage or adoption must be substantiated by the production of evidence showing that a bona fide change has been made for all purposes. The original name is not required in cases of adoption.

All photographs included with an application become the property of the Government of Barbados when it is lodged.
APPLICATION FORM “A” To avoid delay, answers to all relevant sections should be completed in ink in applicant’s own handwriting.

There are good reasons for this. Except in the case of physical disability, failure to comply may lead to delay in the issue of passport.

<table>
<thead>
<tr>
<th>Surname:</th>
<th><strong>PERSONAL DESCRIPTION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(State whether Mr., Mrs. or Miss)</strong></td>
<td></td>
</tr>
<tr>
<td>Christian Names</td>
<td>Profession or Occupation</td>
</tr>
<tr>
<td>Or other names</td>
<td>Residence (Country)</td>
</tr>
<tr>
<td><strong>(in full: block capitals)</strong></td>
<td></td>
</tr>
<tr>
<td><em><em>Age last</em> birthday</em>*</td>
<td><strong>Place &amp; Country of Birth</strong></td>
</tr>
<tr>
<td>Married Status:</td>
<td>Single</td>
</tr>
<tr>
<td><strong>(tick appropriately)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Maiden name (if applicant is woman who is or has been married)</strong></td>
<td>Height: Centimetres</td>
</tr>
<tr>
<td><strong>(use block capitals)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Has name been changed otherwise than by marriage?</strong></td>
<td>Colour of eyes</td>
</tr>
<tr>
<td>If so, state original name <strong>(in block capitals)</strong></td>
<td>Colour of hair</td>
</tr>
<tr>
<td>[See Note 4(a)]</td>
<td></td>
</tr>
<tr>
<td><strong>Present Address</strong> <strong>(in block capitals)</strong></td>
<td>Special Peculiarities (Visible)</td>
</tr>
<tr>
<td><strong>Usual Place of Residence</strong> <strong>(in block capitals)</strong></td>
<td></td>
</tr>
</tbody>
</table>

* If applicant is under 18 years of age, written consent of parent must be produced [See Note 4(b)]

2 TO BE COMPLETED BY PERSONS BORN ABROAD

**A Particulars of applicant’s father/mother [See Note 4(b)]**

<table>
<thead>
<tr>
<th><strong>Place &amp; country of father’s birth</strong></th>
<th><strong>Date of father’s birth</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Place &amp; country of mother’s birth</strong></td>
<td><strong>Date of mother’s birth</strong></td>
</tr>
<tr>
<td>If father/mother is a citizen of Barbados by Naturalisation or Registration, state -</td>
<td></td>
</tr>
<tr>
<td><strong>No. of Document</strong></td>
<td><strong>Date of Issue</strong></td>
</tr>
<tr>
<td><strong>Place of Issue</strong></td>
<td></td>
</tr>
</tbody>
</table>

**B If applicant’s birth was registered at a Barbados Consulate abroad state –**

<table>
<thead>
<tr>
<th>Name of Barbados Consulate</th>
<th><strong>Date and No. of Registration Certificate</strong></th>
<th>Place, country and date of father’s birth</th>
</tr>
</thead>
</table>

3 **National Status** **(tick √ appropriately)**

**CITIZEN OF BARBADOS**  
<table>
<thead>
<tr>
<th><strong>by Birth</strong></th>
<th><strong>by Descent</strong></th>
<th><strong>by Naturalisation</strong></th>
<th><strong>by Registration</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No. of Document</strong></td>
<td><strong>Date of Issue</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Place of Issue</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sign name in each box along center of each box below as indicated by arrows
4 DOCUMENTS PRODUCED TO BE NOTED HERE (Tick \ appropriate box)

☐ Applicant's Birth Certificate  ☐ 2 Passport Sized Photographs  ☐ Certificate of Citizenship

☐ Child's or Children's Birth Certificate  ☐ Marriage Certificate  ☐ Other Documents

5

APPLICANT’S SIGNATURE
(Sign in center of box by arrow)

6 NEXT OF KIN -
Name ..................................................
Relationship ...........................................
Address ..................................................
Contact No.............................................

7 CHILDREN UNDER 16 (if to be included in the passport)

Christian Names or Other Names  (in full)  Surname  Place of Birth  Date of Birth  Sex & Relation To Applicant

8 PARTICULARS OF PREVIOUS PASSPORT WHICH HAS BEEN LOST OR IS NOT AVAILABLE FOR PRESENT USE (See note, Section 11)

No. ..............................................  Issued at ..................................................  on ..................................................

Bearer's full name at time of issue .................................................................

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 or obtain recovery? .................................................................

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

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

Has loss been reported to the Police? ............... If so, state where and when .................................................................

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

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, Barbados, to a Barbados Consulate or to a Barbados High Commissioner's Office for Cancellation.

Signed .....................................................  Date ..................................................
PARENTS CONSENT

I, (name) ................................................................., the (relationship) ................................................................. hereby give my consent for him/her/them

(a) to hold a passport,

of

(b) to be included in the passport of .................................................................

Signature .................................................................

SUPPLEMENTARY INFORMATION


NOTE: Do not sign this form unless you have read the notes on Page 1.

DECLARATION

I, the undersigned, hereby apply for the issue of a passport, I declare that the information given in this application is correct to the best of my knowledge and belief, and that I have not lost the status of Citizen of Barbados; nor renounced such Citizenship.

And I further declare,

that I have not previously held or applied for a passport of any description,

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 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, cross out A and B and complete section 8.

CERTIFICATION (See Notes 2 and 3 on page 1.)

I certify that the applicant has been known personally to me for ................................................................. (state period) and that to the best of my knowledge and belief the facts stated on this form are correct.

Signature .................................................................

Full name in Block capitals .................................................................

Occupation (see Note 2 on page 1) .................................................................

Address .................................................................

Date .................................................................

IMPORTANT: Applicants and persons who countersign applicants (see Section 12) are warned that, should any statement made in connection with this application prove to be untrue, the consequences to them may be serious.

FOR OFFICIAL USE ONLY

Amount of Fee Paid

Issue authorized by .................................................................

Chief Immigration Officer