INSTRUCTION SHEET

CHILDREN OF GRENADIAN PARENTS UNDER & OVER 18 YEARS

- 1. One completed form signed by a Justice of the Peace or Notary Public.
- 2. Four Passport size photographs CERTIFIED by a Justice of the Peace or Notary Public.
- 3. ORIGINAL and ONE (1) PHOTOCOPY of Birth Certificate.
- 4. ORIGINAL and ONE (1) PHOTOCOPY of Birth Certificate of Grenadian Parent.
- 5. Medical Certificate from a Registered Practitioner, which includes:
 - a. Chest X-Ray
 - b. Malaria Blood Smear
 - c. Serum Creatinine
 - d. RPR, VDRL or other serologic test for Syphilis
 - e. Stool for culture and Microscopic examination
 - f. HIV antibody test
 - g. Update immunization status including measles, mumps, rubella, tetanus and hepatitis B 3 dose
 - * Immunization card **MUST** be produced.

Copy of Immunization card.

h. Mantoux (TB) test

NB: Parents name and nationality, Applicant's Occupation and Contact Number should be included on application form.

Fee: Application - EC\$100 Citizenship - EC\$250 (Equivalent to **US\$140**)

REMIT APPLICATION WITH DOCUMENTATION TO:

Office of the Prime Minister

Attn: Permanent Secretary

Ministerial Complex, 6th Floor

Botanical Gardens

Tanteen

St. George's

GRENADA

W. I.

Tel. 1 **(473) 440–2255 or 2265** (*Ask for the Office of Home Affairs*)

GRENADA CITIZENSHIP ACT, 1976—SECTION 5 (1)

Application for Registration as a Citizen of Grenada made by Commonwealth Citizen or Citizen of the Republic of Ireland.

CAUTION: To give false information on this form, purposely or reciclessly is a criminal offence punishable with imprisonment. 14—Grenada Citizenship Act, 1976). 1.		
1. I. (Name) (Present Address) full age and capacity and was born at in the parish of in t	N.B.	Portions of this form which are not applicable must be struck out and initialled in every case.
full age and capacity and was born at	CAUTI	
on	1.	I,of(Present Address)
(dd/mm/y999) 2. My father's full name (is) (was)		full age and capacity and was born atin the parish of
in the parish of		on(dd/mm/yyyy)
1 am (single) (married) (a widower) (a widow) (divorced from my wife/husband). My (Wife's) (Husband's) full name (is) (was)	2.	My father's full name (is) (was)and he was born at
4. My (Wife's) (Husband's) full name (is) (was)		in the parish ofon(dd/mm/yyyy)
(b) Grounds on which the applicant claims to be such a Citizen:— (b) Grounds on which the applicant claims to be such a Citizen:— (c) I am ordinarily resident in Grenada and intend, if registered, to reside in Grenada (Please check if applicable). AND/OR (b) I am in the service of the Government of Grenada and intend, if registered, to continue in the service of the Government Grenada (Please check if applicable). 7. (a) I have been ordinarily resident in Grenada during the past five years as follows:—	3.	I am (single) (married) (a widower) (a widow) (divorced from my wife/husband).
(b) Grounds on which the applicant claims to be such a Citizen:- (b) Grounds on which the applicant claims to be such a Citizen:- (c) (a) I am ordinarily resident in Grenada and intend, if registered, to reside in Grenada (Please check if applicable). AND/OR (b) I am in the service of the Government of Grenada and intend, if registered, to continue in the service of the Government Grenada (Please check if applicable). 7. (a) I have been ordinarily resident in Grenada during the past five years as follows:-	4.	My (Wife's) (Husband's) full name (is) (was) and (she) (he) was born
(b) Grounds on which the applicant claims to be such a Citizen:— 6. (a) I am ordinarily resident in Grenada and intend, if registered, to reside in Grenada (Please check if applicable). AND/OR (b) I am in the service of the Government of Grenada and intend, if registered, to continue in the service of the Government Grenada (Please check if applicable). 7. (a) I have been ordinarily resident in Grenada during the past five years as follows:—		on(dd/mm/yyyy)
(b) Grounds on which the applicant claims to be such a Citizen:—	5. <i>(a)</i>	I am a Citizen of the following country or countries:-
(b) Grounds on which the applicant claims to be such a Citizen:- 6. (a) I am ordinarily resident in Grenada and intend, if registered, to reside in Grenada (Please check if applicable). AND/OR (b) I am in the service of the Government of Grenada and intend, if registered, to continue in the service of the Government Grenada (Please check if applicable). 7. (a) I have been ordinarily resident in Grenada during the past five years as follows:-		
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		Grenada (Please check if applicable).
	7. <i>(a)</i>	I have been ordinarily resident in Grenada during the past five years as follows:-
		AND/OR

(b)	I have been in the service of the Government of Grenada during the past five years as follows:-				
	<u>Department</u>	<u>Capacity</u>	<u>From</u>	<u>To</u> (Dates)	
	The special circumstances in which I desir	e that the period of ordinary resid	lence or service in the	Government of Grenada	
	shorter than five years which is mentioned i	n paragraph 7 above would be acce	pted are as follows:-		
	I (have) (have not) previously (a) renounced or (b) been deprived of citizenship of Grenada.				
(a)	The DECLARATION OF RENUNCIATION of	citizen was made on			
	OR				
(b)	The ORDER OF DEPRIVATION of citizenshi	p was made on(dd/mm/			
).	I,application are true, and I make this solemn			particulars stated in this	
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).	application are true, and I make this solemn Made and subscribed this	declaration conscientiously believi	ng the same to be true. (Applica	ant's Signature) ant's Oignature) ion (Day–Month–Year)	
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).	application are true, and I make this solemn Made and subscribed this	declaration conscientiously believi	Date of Appreciat (Signature of)	ant's Signature) ant's Oignature) ion (Day–Month–Year)	
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