

CONSULATE GENERAL OF GRENADA

APPLICATION REQUIREMENTS FOR FIRST-TIME APPLICANTS (GRENADIAN BORN) CARIBBEAN COMMUNITY GRENADA MACHINE READABLE EPASSPORT

1. <u>Please also read and follow instruction on the first page of application form</u>. IF MAILING YOURE APPLICATION, <u>PLEASE USE AN EXPRESS SERVICE THAT CAN BE TRACKED</u>.

- 2. First-Time Applicant **must** submit to an in-person interview at the Consulate. Currently, these interviews are being conducted via the Zoom platform. Please call or email the Consulate General of Grenada, Miami (305–570–2716 x.102 or miami@mofa.gov.gd) to schedule your interview.
- 3. Applicant **must** also complete the **<u>Travel Document Questionnaire</u>** and attach to application.
- 4. Applicant **must sign** the form in the space provided above **Section 1** and in **Section 10**.
- 5. Applications **must** be completed using **BLUE** or **BLACK** ink and in **BLOCK CAPITAL** letters.
- 6. Applicant **must** complete Sections **1**, **3**, **4**, **5**, **7**, **10 & 11** and **if applicable** Sections **2**, **8 & 9**.
- 7. Applicants who are married, divorced, separated **must** also complete **Section 2**.
- 8. Section 11: Recommender, CANNOT be a relative (*direct or in-law*) of the applicant and must also endorse the reverse side of one of the applicant's photos as indicated in the instructions on the first page of the application. See RECOMMENDER and PHOTOGRAPHS sections of the Passport Application Instructions for details (*"I certify that this is a true likeness of the passport holder Mr./Mrs./Ms./Miss"*). Should you not live near a Grenadian who can be your Recommender, please have an Attorney or Notary Public complete Section 11 minus the second paragraph (*concerning the amount of time they have know you*). Have them draw a line through Grenada and put their country of citizenship and if it is a Notary Public completing the section, have them draw a line through attorney-at-law and input Notary Public.
- 9. Two passport size photos no more than six (6) months old **must** be submitted with the application. The **Recommender** in section 11 **must** endorse the reverse side of one of the photos. See **item 8** above for details.
- 10. Specifications for photographs:
 - i. No glasses.
 - ii. No hair bands visible.
 - iii. No big earrings.
 - iv. Ears must be visible.
 - v. Hair **must** be away from face and not covering the forehead or ears.
 - vi. Chest **must** be covered.
- 11. Children under the age of 16 years must have written consent of parent/legal guardian when applying for a passport.
- 12. Applicants *if married*, **must** supply their **original Marriage Certificate**. If **divorced**, please supply **original Divorce Decree**. All documents will be return with the new passport.
- 13. Applicant **must** submit the following with their application:
 - i. Completed application, and
 - ii. **Original** birth certificate, and
 - iii. **Original** marriage certificate or divorce decree (*if applicable*), and
 - iv. Coloured copy of your Driver's License/Non-Driver's Identification (if applicable), and
 - v. Coloured copy of your Foreign Passport (if applicable), and
 - vi. Travel Document Questionnaire, and
 - vii. Personal Interview Questionnaire, and
 - viii. Two (2) passport photos; 1 endorsed by the Recommender, and
 - ix. In the case of a child under 18 years, letter of consent from spouse not completing application, and
 - x. Money orders for application process (\$250 for application and \$45 courier fee if on USA mainland and \$75 outside USA mainland).

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eMail <u>miami@mofa.gov.gd</u> • Website <u>https://www.GrenadaConsulateMiami.com</u>

Fee Schedule Updated 1st November 2019

PLEASE READ ALL INSTRUCTIONS ON APPLICATION FORM AND PRECEDING FOR FURTHER DETAILS

Caribbean Community Grenada Passport Fee Schedule within the USA	
Item	Fees
New Caribbean Community Grenada ePassport (36 pages)	US\$250
Express Service Fee (returns in approximately seven business days)	US\$50

Return Postage and Handling Fees if you live within mainland USA				
Overnight Express Mail (FedEx)	US\$45			
Return Postage and Handling Fees if you live outside mainland USA				
International Express Mail (FedEx)	US\$75			

NO PERSONAL OR COMPANY CHEQUES ARE ACCEPTED CASH ACCEPTED IN PERSON **ONLY**

CERTIFIED CHEQUES AND MONEY ORDERS (PAYABLE TO EMBASSY OF GRENADA)

PASSPORT APPLICATION FEES AND COURIER FEES <u>MUST</u> BE <u>SEPARATE</u> MONEY ORDERS OR ENTIRE APPLICATION WILL BE RETURNED.

Failure to follow all the preceding instructions will result in <u>unnecessary</u> delays in processing and obtaining your passport.

Mail To: Consulate General of Grenada



PART A

INSTRUCTIONS FOR COMPLETION OF CARIBBEAN COMMUNITY GRENADA PASSPORT APPLICATION FORM

(regulations 3 and 4)

GENERAL INSTRUCTIONS

- All relevant sections must be completed.
- Answers should be clearly written in CAPITAL LETTERS.
- Where an applicant is outside of the State of Grenada, he or she may submit an application at the nearest Embassy, Consulate or Mission office.

SIGNING THE FORM

- The passport holder must sign the form in the space provided above Section 1 and in section 10. If the passport holder is unable to sign, the space must remain blank.
- In the case of a passport holder under 16 years old, the legal guardian of the passport holder must sign section 10.

PASSPORT HOLDER UNDER 16 YEARS OLD OR WITH INCAPACITY

- An application for a passport holder under 16 years old must be made by or with the written consent of the legal guardian of the passport holder i.e. the parent or the individual who has legal custody and proof of legal custody is required.
- Where a passport holder is at least 16 years old but is unable to complete the form as a result of mental incapacity, the application must be made by or with the consent of the legal guardian of the passport holder i.e. the parent or the individual who has legal guardianship and proof of legal guardianship is required.
- Where a passport holder is at least 16 years old but is unable to complete the form as a result of physical incapacity, the application may be made by the next of kin i.e. the spouse, parent, child, sibling or other individual empowered by a Power of Attorney.

RECOMMENDER

- Section 11 should be completed by the recommender.
- The recommender should be a Citizen of Grenada who is personally acquainted with the passport holder, and is a Member of Parliament, Justice of the Peace, Minister of Religion, Medical or Legal Practitioner, Established Civil Servant, Principal and other qualified Teachers, Bank Official, Police Officer from the rank of Sergeant, or any person of similar standing.
- A recommender who is not a Citizen of Grenada is acceptable only if he or she is a Legal Practitioner.
- In case of a passport holder under 16 years or a person with mental incapacity, the recommender should be personally acquainted with the legal guardian of the passport holder for at least 2 years.
- A member of the passport holder's immediate family is unacceptable as a recommender.

DOCUMENTS TO BE PRODUCED

- Every passport holder must produce his or her birth certificate.
- Where the passport holder was not born in Grenada, he or she must produce the document establishing that he or she is a citizen of Grenada (e.g. the *birth certificate of the passport holder's parent* who was born in Grenada, a *certificate of naturalization, registration* or *investment* issued by Grenada to the passport holder or his or her parent).
- Where the passport holder is married, he or she must produce the *marriage certificate* and, if applicable, the *divorce certificate* or *death certificate* of *the spouse*.
- Where the passport holder is an adopted child, he or she must produce the *adoption certificate*.
- Where the passport holder has changed his or her name (other than by marriage), he or she must produce the document giving effect to the change (e.g. a *deed poll*) and his or her birth certificate should reflect the change to his or her name.
- Where a passport holder's previous passport has been lost, stolen or damaged, he or she must submit with the application a *police report* or *Statutory Declaration* outlining the circumstances. Additionally, the passport holder must re-submit all relevant documents.
- All documents (other than photographs and a previous passport) must be submitted in original, along with a photocopy.
- A passport holder who surrenders with the application a *previous Caribbean Community Grenada passport* is not required to produce any other document other than the photographs, unless the passport holder's name or status was changed subsequent to the issue of the previous passport.

PHOTOGRAPHS

- Every passport holder must either produce *two (2) photographs* of his or her portrait taken within *six (6) months* of the application or submit to live capture of his or her portrait.
 - Where the passport holder elects to produce photographs:
 - Photographs must be not *more than 2¹/₂in x 2in or less than 2in x 1¹/₂in*.
 - The portrait must be with full face from bottom of chin to top of forehead clearly visible with full facial features, and without headdress unless in keeping with religious customs.
 - Photographs must be printed on normal thin photographic paper and must not be glazed on the reverse side.

The recommender is required to endorse the reverse side of one copy of the photographs with the words: "*I certify that this is a true likeness of the passport holder "Mr./Mrs./Miss......*"

and add his or her signature.



(regulations 3 and 4)

CARIBBEAN COMMUNITY GRENADA PASSPORT APPLICATION FORM

Signature of Passport Holder in the middle of the space provided.

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(Leave this space blank if applying for a passport for a person unable to sign.)

1	PERSONAL DATA									
	TITLE:			MARITAL STATUS:						
	□ Mr. □ Mrs. □ Miss			\Box Single					□ Widowed	
					Married	1			Re-married	
					Divorce	ed			Separated	
	□ Other (specify:)									
	LAST NAME (Family Name):			FIRST, SECOND, THIRD NAME(S):						
	MAIDEN NAME (if Married Female):			ORI	ORIGINAL NAME (if name changed other than by marriage):					
	Date of Birth (dd/mm/yy		Place of Birth:			Age	Last Birthday:	Nati	onality:	
		-		1						
	Sex: Male Female	Height:	ft ins.	Colo	our of Eye	es:	Colour of Hai	r: Spe	cial Peculiarities (Visible):	
	Country of Residence:	1	Present Address	5:]	Permanent Add	ress:	Telephone:	
									Fax:	
	Occupation:								E-mail:	
2	IF MARRIED, DIVOR SPOUSE	RCE, SEPAR	ATED OR WID	OWE	D, INFO	RMA	TION ON SPO	OUSE OI	R FORMER	
	LAST NAME (Family N	Name):	FI	RST, SECOND, THIRD NAME(S):			IRD NAME(S):			
	MAIDEN NAME (if Female):		ountry of Birth:		Nation	Nationality:				
	Date of Marriage (dd/mm/yy): Place of Marriag		ge:		Occupation:					
	Permanent Address: Mailing Ad		ddress:		Telephone:					
	Permanent Address. Maning Ad						^			
					Fax:					
							Email:			
	State whether married m (If more than once, parts			r marr	riages sho	uld be	e given in sectio	n 9 on pa	ge 3.)	

3	PARTICULARS OF PARENTS							
	FATHER							
	Last Name:	First	First and Second Name(s):					
	Date of Birth (dd/mm/yy):	Place of Birth:			Pro	ofession:		
	MOTHER							
	Last Name:	First	and Second 1	Name(s):				
	Date of Birth (dd/mm/yy):	Place of Birth:	rth:			Profession:		
	MARRIAGE							
	Date of Marriage (dd/mm/yy):	Place of Marriag	ge:		Со	Country of Marriage:		
4	CITIZENSHIP OF PASSPORT H	OLDER						
	Citizen of Grenada by:							
	□ Birth	□ Natu	ralization			🗆 Ir	ivestment	
	□ Descent	□ Regis	stration					
	If a citizen of Grenada by birth, attac							
	If a citizen of Grenada by descent, at investment and attach a certified cop		of parent(s),	or give parti	iculars of certi	ficate of na	uturalization, registration	l or
	Type of Certificate:	Certificate No.	e No. Date of Issue (dd/mm/					
If a citizen of Grenada by naturalization, registration or investment, give particulars of certificate naturalization, registration or investment and attach a certified copy of same.						ation, registration or		
	Type of Document:	Document No.	D	ate of Issue	(dd/mm/yy):	Plac	ee of Issue:	
5	PASSPORT REQUIRED FOR TR	AVELLING TO:						
	PURPOSE OF TRAVEL:							
6	IF PREVIOUS PASSPORT LOST	, STOLEN OR DAM	AGED					
	Passport No: Full nam	ne at issue:			Place of Issu	e: Date	e of Issue (dd/mm/yy):	
	Place of loss:	Date of loss (dd/mm/	/vv)·	Has loss be	een reported to	the Police	? (If yes, attach copy of p	police
			557	report)	- F		. (3),	
	How did loss occur?							
	What measures were taken at time to	report loss and to obt	tain recovery	?				

7	CONTACT IN CASE OF EMERGENC	Y								
	Full Name:	Address:	Telephone:							
			Fax:							
	Relationship:]	Email:							
8	IF MINOR OR PERSON WITH MENT	AL INCAPACITY, LEGAL GUARDIAN'S C	ONSENT							
	I (name of legal guardian) the (relationship) of (name of passport holder) hereby									
	give my consent for him or her to hold a passport.									
	Signature									
0	(Where legal guardian unable to sign the fo	orm, a consent letter may be submitted with the fo	rm.)							
9	SUPPLEMENTARY INFORMATION									
10	DECLARATION OF APPLICANT									
	\Box I declare that the information given	n in the application is correct to the best of my kn	owledge and belief, and							
	☐ I hat the passport holder has not lo	st the status of citizen of Grenada, and								
	Choose one of the following:									
	\Box That the passport holder has not he	eld or applied for any passport whatsoever.								
	□ That all previous Grenadian pass	sports granted to me have been surrendered oth	er than passport or travel document number							
	document was issued to me.	attached and that I have made no other applicat	ion for a passport since the passport or travel							
	\Box That the passport holder has lost the the passport holder has lost the passport holder has lost the passport holder has lost the passport holder has been been been been been been been bee	ne previous passport.								
	I certify that I have read and understood all	the questions set forth in this application and the	answers that I have furnished on this form are							
		lge and belief. I understand that any false, incom lead to having criminal proceedings taken against								
	of the Government of Grenada and can be recalled at any time.									
	Signature	Da	te.							
	keiationship of applicant to passpor	t holder:								

11	DECLARATION OF RECOMMENDER									
	I (name in capitals) a citizen of Grenada/an attorney-at-law declare									
	that to the best of my knowledge and belief that declaration with respect to and the description of Mr./Mrs./Miss.									
	are true and that I can from my personal knowledge of him/her vou									
	him/her as a fit and proper person to receive a passport.									
	I have known the passport holder [or in the case of a person under 16 years or with a mental incapacity I have known the									
	applicant Mr./Mrs./Miss years.									
	This 20 Signature:									
	Profession: Address:									
	Telephone No: E-mail:									
FOI	D AEEICLAL LISE AND V									

TOR OFFICIAL USL	UIULI							
DOCUMENTS PRODUCED TO BE NOTED:								
Passport Holder's Birth Certificate					t			
Divorcee Certificate	Certificate of Registration, Naturalization or Investment	Letter of Consent	Deed	Poll				
OTHER DOCUMEN	TS							
		EIVED.						
PLACE WHERE APPLICATION WAS RECEIVED: St. George's, Grenville, Carriacou, Gouyave, New York, Washington, London, Canada, Venezuela, Trinidad, Other (specify								
-	•	w York, Washington, Londor	n, Canada, Ve	enezuela, I rin	idad, Other (speci	fy		
······)								
Receipt No. Amount of Fees Paid Passport:								
Received by		Date		Express				
Checked & Approved b	Service:							
Supervised by Date				Urgent				
Passport No				Service:				
Date Issued								
Date Expired Total:								

Authority Signature		I
DISTRIBUTION		
Delivered to	Date	
Delivered by	Date	