IMMIGRATION REPORT

Photo

Application for Permission to Reside in St. Vincent and the Grenadines ("COMPLETE IN BLOCK LETTERS")

	("COMPLETE IN BLOCK LETTERS")	
	File No.:	
1.	Name of Applicant (Surname first):	
2.	Date & Country if Birth:	
3.	Nationality: At Birth: Present:	
4.	Marital Status (Married, Single, Widowed, Divorced):	
5.	Date & Place of Marriage:	
6.	Maiden Name if Married Woman:	
7.	Name of Husband /Wife:	
8.	Passport No.: Date & Place of Issue:	
9.	Places of Residence during past ten years:	
	From 20 to 20	,
10.	. Place of Employment during past ten years:	
	From 20 to 20	
	From 20 to 20	
	From 20 to 20	
11.	. Previous convictions:	
	Date Court Place Nature of Offence	
	Market and American Charles an	
12	If Suffering from any Communicable Disease or Metal Disorder - state nature of such Disease or Disorder a whether at any time confined in an Institution for treatment.	ind

3.	Occupation/Profession and Qualifications.
14.	Present Employment:
8 827 1	
15.	Personal Financial Resources:
16.	Name of Bankers or Financial Reference:
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17.	Dependants: (Names, Date and Country of Birth):
18.	Parents: (Name, Date and Country of Birth):
19	Why do you wish to take up residence in St. Vincent:
20	Date of last arrival in St. Vincent / prior to this application, and purpose thereof:
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21	Length of Residence required:
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app	olication have been made by me and are true and correct to the best of my knowledge and belief.
	(Sgd.)
	Devices
	Sworn to / affirmed before me this
	(Sgd.)
	Justice of the Peace/Notary Public