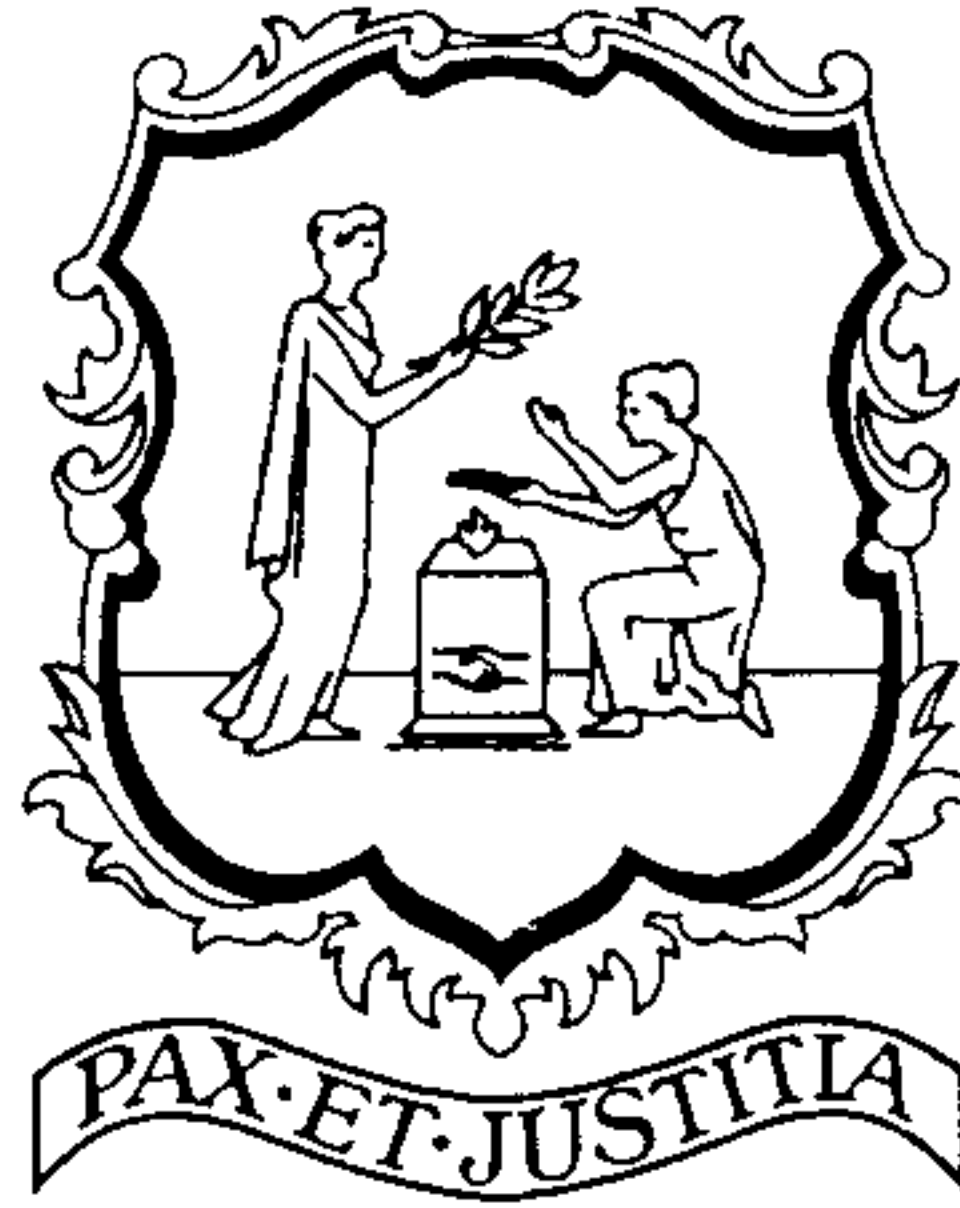


For official use



**APPLICATION FOR REGISTRATION AS A CITIZEN OF
ST. VINCENT AND THE GRENADINES**

Please WRITE or TYPE clearly in BLOCK CAPITALS (except signatures)

1	Full Name					
2	Name at Birth if different from above					
3	Date of Birth					
4	Place and Country of Birth					
5	Permanent Address (in full)					
6	Telephone Number:		Private		Business	
7	Whether single; Married; a Widower; a Widow; Divorced (state which)					
8	Details of	Full Name	Place of Birth	Country of Birth	Date of Birth	If Dead Date of Death
	Applicant's Father					
	Applicant's Mother					
	Applicant's Wife or Husband					
9	Citizenship or Nationality of Applicant at the time of Application (see Note 1)			Usual Signature of Applicant		

10	Give the grounds on which you claim citizenship		
11	Approximate date of any previous application for registration		
	Reference number an approximate date of any correspondence with the Home Office		
12	Have you ever renounced or been deprived of citizenship of the United Kingdom and Colonies?		
	(YES or NO)	ANSWER:	
	If the answer is YES give details:		
	EITHER the date on which, and the place where the	Date:	
	declaration of renunciation was made.	Place:	
	OR the date on which you were deprived of your citizenship:	
13	Particulars of any other name(s) used for private purposes		
14	Particulars of any other name(s) used for trading or business purposes		
15	Occupation		
16	Business address and/or name and address of employers (if a director names and addresses of companies concerned)		
17.	Date and place of first arrival in St. Vincent	Date	Place
18	Is your period of stay in this Country subject to any restriction? (YES or NO)		ANSWER:
19	PARTICULARS OF ORDINARY RESIDENCE (see Note 3) Give all addresses at which you have lived during the last 8 years:		
	Address (in full)	from	Dates to
	(continue on a separate sheet of paper if necessary)		

20	KNOWLEDGE OF THE ENGLISH LANGUAGE			
	State whether fair good or excellent			
21	FINANCIAL STATUS			
	Each part of this section must be answered 'Yes' or 'No' or in the case of (d) 'not applicable' if the answer to (b) (c) or (d) is 'yes' give dates in the second column.			
	(a) Are you financially solvent?	(c) Have you been bankrupt?		
	(b) Have you made any composition with creditors?	(d) If so have you been discharged from bankruptcy?		
22	COURT PROCEEDINGS (sec Note 7)			
	(a) Details of all criminal proceedings taken against you whether in St. Vincent and the Grenadines or any other country which resulted in a conviction. (If the answer is none write "NONE")			
	Nature of charge	Date	Place	Sentence
	(b) Details of all non-criminal proceedings taken against you in the United Kingdom. (If the answer is none write "NONE")			
23	MINOR CHILDREN (see Note 8)			
	(a) Full names including surnames of children under 18 years of age to be registered			
		Date of Birth	Place of Birth	Present Address and Nationality
	(b) Full names of all other children			
		Date of Birth	Place of Birth	Present Address

WARNING: The giving of false information on this form can lead to imprisonment.

2

Delete and
initial the words
in brackets if
not applicable

I (full name)
hereby apply for registration as a citizen of St. Vincent and the Grenadines (and for the
registration of my minor children as indicated in section 23 above).

I do solemnly and sincerely declare that the foregoing particulars in this application
are true, and I make this solemn declaration conscientiously believing the same to be
true.

If at anytime before a certificate is issued to me the accuracy of any of the foregoing
particulars is affected by an alteration in circumstances, I undertake to inform the
Government of St. Vincent and the Grenadines in writing forthwith.

Signature of Applicant:

MADE and SUBSCRIBED this day of 20.....

before me (full name) at

Address or
Office Stamp:

Signed:

Qualification:

(State whether Commissioner for Oaths, Justice of the
Peace, Notary Public or other authorised person)

SUBMISSION OF APPLICATION

Before sending in your completed form please list here the documents (eg. passport, birth certificate
etc.) which you are sending with it:

- | | |
|---------|---------|
| 1 | 4 |
| 2 | 5 |
| 3 | 6 |

SEND ALL NECESSARY EVIDENCE WITH YOUR APPLICATION TO AVOID DELAY

**APPLICATION FOR REGISTRATION AS A CITIZEN OF
ST. VINCENT AND THE GRENADINES**

REFERENCES

1. Name and full
Postal Address
(in BLOCK LETTERS)

Mr./Mrs./ Miss:

Tel. No.

I, the undersigned, hereby state that I am a citizen of St. Vincent and the Grenadines; that I am a householder, and that I am not the solicitor or agent or a relative of

I support this application from my personal knowledge of, and close acquaintance with, the applicant for years.

I vouch for his/her good character and loyalty and am prepared to furnish full details about my knowledge of, and acquaintance with, the applicant.

Date:.....

Signature:.....

2. 1. Name and full
Postal Address
(in BLOCK LETTERS)

Mr./Mrs./ Miss:

Tel. No.

I, the undersigned, hereby state that I am a citizen of St. Vincent and the Grenadines; that I am a householder, and that I am not the solicitor or agent or a relative of

I support this application from my personal knowledge of, and close acquaintance with, the applicant for years.

I vouch for his/her good character and loyalty and am prepared to furnish full details about my knowledge of, and acquaintance with, the applicant.

Date:.....

Signature:.....

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OATH OF ALLEGIANCE

I swear by Almighty God that I will be faithful and
bear true allegiance to Her Majesty Queen Elizabeth the Second Her Heirs and Successors, according
to Law.

.....

Sworn and subscribed this day of 20

.....

State whether Justice of the Peace, Commissioner for Oaths, Notary Public or other authorised
person.

Name and address of person who administered the

Oath in block capitals

.....

.....