APPLICATION FOR A JAMAICAN PASSPORT

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM. YOU SHOULD WRITE CLEARLY IN INK USING BLOCK CAPITALS. ALL RELEVANT INFORMATION **MUST BE PROVIDED IN FULL.**

PHOTOCOPIES WILL NOT BE ACCEPTED. 1.0 **DOCUMENTS**

1.1 Eligibility for a Jamaican Passport is based on proof of Jamaican Citizenship. All applicants are therefore required to submit one [or more] of the following documents as applicable:

Certified copy of Birth Certificate	Certificate of Registration	Certificate of Naturalization
Certified copy of Adoption Certificate	Letter of Certification of Citizenship	

1.2 Persons claiming Jamaican Citizenship by Descent MUST have their claim established prior to the submission of their application for a passport. The documents required are:

Applicant's Birth Certificate	Proof of Parent's Jamaican Citizenship	Parents' Marriage Certificate (where applicable)
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1.3 Applicants are also required to provide one of the following supplementary identification documents:

National Voter's Identification Tax Registration Number (TRN)	Driver's License Other identification issued by a competent authority	Previous Passport
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- 1.4 Any name change must be substantiated by documentary evidence. A Deed Poll or other legal document *must* be produced to substantiate the change of name. A married or divorced woman, who has acquired her spouse's surname, is required to submit a certified copy of her Marriage Certificate.
- Applications for the renewal of a passport MUST be accompanied by the expired passport. If the renewal is necessary because there are no more available pages, the current passport must be submitted. (See Section E)
- 1.6 If applicant's previous passport has been lost, stolen or destroyed and is not available for presentation, a police report stating the circumstances <u>MUST</u> be submitted with the application form. <u>The application will not be processed if the applicant fails to submit a police report. (See Section E)</u> Substitute Passports are issued for a restricted period, subject to conditions determined by Passport Officer.

2.0 CONSENT FOR MINORS (See Section D) THE APPLICATION FOR A CHILD UNDER 16 YEARS MUST BE COMPLETED BY EITHER THE MOTHER, OR FATHER OR LEGAL GUARDIAN.

Persons under 18 years of age, who are unmarried, require the written consent of the mother and/or the father or a legal guardian, except where such person is a member of the Security Forces. In the event that neither parent nor legal guardian is available, the written consent of the Minister responsible for passports is required.

.0 PHOTOGRAPHS LLL PHOTOGRAPHS SUBMITTED WITH AN APPLICATION BECOME THE PROPERTY OF THE GOVERNMENT OF AMAICA.

Applicants are required to submit two (2) identical copies of a professionally produced photograph taken not more than six (6) months prior to the application, with the following specifications:

• The photographs should be taken in colour with a flat finish, against a plain background.

- There should be no reflection from eyeglasses or background shadows.

 Photographs should provide a full frontal view of the head, neck and top of the shoulders with ears clearly visible.
- The applicant should wear no head covering while taking the photograph except where required for religious purposes.
- Applicants who wear headgear for religious reasons must indicate their religion at Section H.
- The size of the face should be 25mm to 35mm, from the chin to top of head.

 When the photograph is cut to a size of about 35mm, there should be a margin of 3mm to 4mm between the head and the edge of the photograph.

4.0 CERTIFICATION OF APPLICATION AND PHOTOGRAPHS (See Section F)

For applications submitted to the Consulates General of Jamaica in New York or Miami, or to the Embassy of Jamaica in Washington D.C, the following instructions apply:

SECTION 4.0 - CERTIFICATION OF APPLICATION AND PHOTOGRAPHS (See Section F)

- SECTION 4.1 The application and one (1) photograph MUST be certified by one of the following persons:
 - 1) A Notary Public with a valid commission. OR
 - 2) A Jamaican Consular Officer, OR
 - A Jamaican Honorary Consul
- SECTION 4.4 This section is applicable ONLY to authorized Jamaican Government officials in the respective Consulates/Embassy in the United States.
- **4.2** The official who certifies the application is also required to certify the reverse side of one photograph of the applicant, with the following inscription above his/her signature:
 - "I certify that this is a true photograph of,". (Insert applicant's name)

4.3 NO EMBOSSED SEAL SHOULD BE AFFIXED TO PHOTOGRAPHS

4.4 NO FEE SHOULD BE PAID FOR CERTIFYING AN APPLICATION

5.0 **EMERGENCY CONTACT** (See Section G) Applicants should provide the particulars of a person(s) who may be readily contacted in the event of an emergency.

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D	CONSENT FOR MINOR (Applicable to persons under 18 years) (Either Mother/Father or Legal Guardian may give consent)			
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	Declaration of person giving consent:			
	I (name), t	the (relationship)		
	of (minor's name)	, give my conse	ent for him/her to hole	d a passport.
E	Signature of Parent or Legal Guardian: DECLARATION OF APPLICANT	Date:		
	I, the undersigned, apply for the issue of a Jamaican Passpo correct to the best of my knowledge and belief. I further declar	ort. I declare that the	information given	in this application is
	□I have not previously held or applied for a Jamaican pa	-		
	☐ All previous passports granted to me have been surrer No which is submitted herewit	ndered, other that pass h.	sport or travel doci	ument
	☐ My passport has been lost or is not available for pre Police or to the Passport Office or to a Jamaican Cons			
	A POLICE REPORT <u>MUST</u> BE SUBMITTED BY AN APPLICANT WHOS THAT A LOST PASSPORT SUBSEQUENTLY COMES INTO THE POSS PASSPORT OFFICE OR A JAMAICAN EMBASSY, HIGH COMMISSION	SESSION OF THE HOLDE I OR CONSULATE OVERS	R, IT <u>MUST</u> BE RETU SEAS FOR CANCELL	RNED TO THE ATION
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	Surname: First Name:		Middle Name(s):	
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		Date of	Declaration:	
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	Signature of Applicant	\square \square /		
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	I, First Name Middle Name(s)	Surname	Desig	nation/Occupation
	hereby certify that I have known the applicant	ll Name of Applicant as stat	ted on Application	for
	(years) and that the information given is con	rrect to the best of my knowle	edge and belief.	
	Date of Certification: Day Month Year			
		Signature of Certify	ying Official:	
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