



**RECOGNITION OF SPOUSES AND/OR DEPENDANT(S)
IN RESPECT OF THE CARICOM SINGLE MARKET AND ECONOMY (CSME)**

Full Name: Mr./Mrs./Miss.....

Current Address:.....
.....

Contact No. (local):.....

Email:.....
Day Month Year

Place of Birth:.....

Date of Birth:.....

Sex:.....

Nationality:.....

Passport No.:.....

Place of Issue:.....

Date issued:.....

Expiry Date:.....

Marital Status:.....

Occupation:.....

Skills Certificate No.:.....

Issuing Member State:.....

- Category:** University Graduate
Artiste
Musician
Sportsperson
Holders of Associate Degree or comparable qualification
Household Domestics with a CVQ

- Media Worker
Nurse
Teacher
Artisan with a CVQ¹

PLEASE INSERT INFORMATION OF DEPENDANT(S)

Name of Dependant	Date of Birth	Sex	Place of Birth	Passport Number	Place and Date Issued	Expiration Date	Relationship to Applicant

¹CVQ - Caribbean Vocational Qualification

PLEASE INSERT THE INFORMATION OF YOUR SPOUSE

Full Name: Mr./Mrs.....

Place of Birth:..... **Date of Birth:**.....

Sex:..... **Nationality:**.....

Passport No.:..... **Place of Issue:**.....

Date issued:..... **Expiry Date:**.....

I, the undersigned, declare that the information given in this application is true to the best of my knowledge and belief.

Signature:..... **Date:**.....

Receiving Officer:..... **Date:**.....

PLEASE READ ALL INSTRUCTIONS BEFORE SUBMITTING THE APPLICATION. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. PLEASE FILL THE APPLICATION IN BLOCK LETTERS.

DEPENDANT(S)

1. Completed form
2. One (1) notarized copy of your Certificate of Recognition of Caribbean Community Skills Qualification
3. One (1) certified passport-sized photograph for each dependant
4. One (1) notarized copy of birth certificate for each dependant
5. One (1) notarized copy of the bio-data and immigration status pages from a valid passport for each dependant
6. One (1) notarized copy of Adoption papers **(for adopted children)**
7. Birth Certificate of applicant (if dependant is a parent)
8. A valid Police Record of dependant(s) from country of residence for the past year **(if dependant is a parent, or is age 16 and over)**
9. Receipt of Payment of Processing Fee (EC\$50.00)

SPOUSE

1. Completed form
2. One (1) notarized copy of your Certificate of Recognition of Caribbean Community Skills Qualification
3. One (1) notarized copy of marriage certificate
4. One (1) notarized copy of bio-data and immigration status pages
5. One (1) certified passport-sized photograph
6. Police record of spouse from country of residence for the past year
7. Receipt of Payment of Processing Fee (EC\$50.00)

NOTE:

- Payment is required to be made at the Inland Revenue Department in St. Kitts at all times. Payment will not be accepted at the Ministry of International Trade
- The fee covers the recognition of any amount of dependants; however, if they are added at different times, the fee will apply each time
- For the purpose of this process, a police record is valid for six months
- For the purpose of this process, and in accordance with the Protocol on Contingent Rights, a dependant is referred to as:
 - a) any unmarried child of a principal beneficiary or of his/her spouse:
 - (i) under the age of 18 years
 - (ii) under the age of 25 years attending school or university
 - (iii) over the age of 18 years who, due to disability, is wholly dependent on a principal beneficiary
 - b) parents of the principal beneficiary wholly dependent on such beneficiary, or
 - c) any other natural person certified as such by the Court