RECOGNITION OF SPOUSE AND/OR DEPENDANT(S)
CARICOM SINGLE MARKET AND ECONOMY (CSME)

Please read notes overleaf before completing this Application Form. PLEASE FILL OUT THE FORM IN BLOCK LETTERS. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

WARNING TO ALL APPLICANTS:
Any such person who makes a written or oral statement knowingly to be false or misleading is guilty of an offence and is liable to a fine and/or imprisonment.

Full Name: Mr./Mrs./Miss……..

Category:
- ☐ University Graduate
- ☐ Artiste
- ☐ Musician
- ☐ Sportsperson
- ☐ Household Domestics
- ☐ Private Security Officers
- ☐ Media Worker
- ☐ Nurse
- ☐ Teacher
- ☐ Artisan
- ☐ Agricultural Workers
- ☐ Aviation Personnel
- ☐ Holders of Associate Degree or comparable qualification

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:**.....

PLEASE INSERT INFORMATION OF DEPENDANT(S) (if applicable**)**

Name of Dependant	Date of Birth	Sex	Country of Birth	Passport Number	Country and Date of Issue	Date of Expiry	Relationship to Applicant

PLEASE INSERT THE INFORMATION OF YOUR SPOUSE (if applicable**)**

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.

Requirements:

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 (EC$50.00 - payable at the Inland Revenue Department in St. Kitts). **Please note that payment will not be accepted at the Ministry of International Trade.**

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** must be made at the **Inland Revenue Department in St. Kitts** at all times. Payments will not be accepted at the **Ministry of International Trade**.

- The fee covers the recognition of all dependants listed on the application, provided that the supporting documents are submitted.

- For the purpose of this process, a police record is valid for six (6) 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