



**Consulate General of the
Republic of Trinidad and Tobago**

Tel: (212) 682-7272
Fax: (212) 232-0368
E-mail: cgnyconsulateinfo@foreign.gov.tt

125 Maiden Lane
4th Floor
New York, NY, 10038

*DSC: DIPLOMATIC SERVICE CHARGE
** RESEARCH (payable when passport is unavailable)
***MRP- MACHINE READABLE PASSPORT

SERVICE	COST	CONSULAR FEES	TOTAL
RESTORATION	\$89.00	*DSC - \$5.00	\$94.00
RENUNCIATION	\$23.00	*DSC - \$5.00	\$28.00
VISAS (SINGLE ENTRY)	\$33.00	*DSC - \$20.00	\$53.00
VISAS (MULTIPLE ENTRIES)	\$65.00	*DSC - \$20.00	\$85.00
NEW/RENEWED MRP	\$40.00	*DSC - \$20.00	\$60.00
BUSINESS PASSPORT	\$56.00	*DSC - \$20.00	\$76.00
CERTIFICATE OF TRINIDAD & TOBAGO CITIZENSHIP	\$18.00	*DSC - \$5.00 **RESEARCH - \$20.00	\$23.00 \$43.00
LOST VALID PASSPORT	\$217.00	***MRP - \$159.00 *DSC - \$20.00 Notarization - \$18.00 **RESEARCH - \$20.00	\$217.00
LOST EXPIRED PASSPORT	\$98.00	***MRP - 40.00 *DSC - \$20.00 **RESEARCH - \$20.00 Notarization - 18.00	\$98.00
EMERGENCY CERTIFICATE	GRATIS	*DSC - \$20.00 PROCESSING - \$5.00 **RESEARCH- \$20.00	\$25.00 \$45.00
POSTAGE: PRIORITY OVERNIGHT	\$24.00	-	\$24.00
PRIORITY 2-3 DAYS	\$15.00		\$15.00
SWORN DECLARATION/AFFIDAVIT	\$40.00	*DSC - \$5.00	\$45.00
FALSE DECLARATION STATEMENT	\$55.00	*DSC - \$5.00	\$60.00
SICK LEAVE APPLICATION AND VERIFICATION OF MEDICAL CERTIFICATES	GRATIS	*DSC - \$5.00	\$5.00
NOTARIZATION	\$18.00	*DSC - \$5.00	\$23.00
POLICE CERTIFICATE OF CHARACTER	\$8.50 (International Money Order)	*DSC - \$5.00	\$8.50 (International Money Order) \$5.00
FIRST TIME ELECTRONIC BIRTH CERTIFICATE APPLICATION	GRATIS	*DSC - \$5.00	\$5.00
PAID BIRTH CERTIFICATE	\$6.00	*DSC - \$5.00	\$11.00
MARRIAGE CERTIFICATE	\$6.00	*DSC - \$5.00	\$11.00
DEATH CERTIFICATE	\$6.00	*DSC - \$5.00	\$11.00
ADOPTION CERTIFICATE	\$6.00	*DSC - \$5.00	\$11.00
HUMAN REMAINS	\$32.00	*DSC - \$5.00	\$37.00
CREMATED REMAINS	\$32.00	*DSC - \$5.00	\$37.00
BIRTH CERTIFICATE CORRECTION	\$5.00	-	\$5.00
BIRTH CERTIFICATE SEARCH (each)	\$5.00	-	\$5.00
CERTIFICATE OF NON- IMPEDIMENT	\$28.00	Search - \$15.00 Certificate - \$8.00 *DSC \$5.00	\$28.00
Effective September 03, 2018			



Consulate General of the Republic of Trinidad and Tobago
125 Maiden Lane, 4th Floor, New York, NY 10038, U.S.A.
Tel.: (212)682-7272 ▪ Fax: (212)232-0368 ▪ e-mail: cgnyconsulateinfo@foreign.gov.tt ▪
Website: <https://foreign.gov.tt/cgnewyork>

CHILD PASSPORT APPLICATION
For Trinidad and Tobago citizens under 16 years of age
INSTRUCTIONS AND GENERAL INFORMATION
Trinidad and Tobago Consulate General, NY

ENTITLEMENT TO A TRINIDAD AND TOBAGO PASSPORT IS RESTRICTED TO CITIZENS OF TRINIDAD AND TOBAGO ONLY.

ALL first-time applicants for the Machine Readable Passport MUST appear in person.
PHOTO WILL BE TAKEN ON THE DATE THE APPLICATION IS ACCEPTED AT NO ADDITIONAL COST.

1. CITIZENSHIP

Original documentary evidence of the child's Trinidad and Tobago Citizenship must be submitted

If the child was born in Trinidad and Tobago:

- **Birth Certificate – Computer generated with pin number**

If the child was born outside of Trinidad and Tobago:

- **Birth Certificate**
- **Parent's Trinidad and Tobago Birth Certificate**
- **Proof of parent's Trinidad and Tobago citizenship at the time of the child's birth and parent's marriage certificate where necessary.**
- **Adoption Certificate**

****N.B.* ONE (1) COLOURED COPY OF ALL DOCUMENTS MUST ACCOMPANY ORIGINALS.***

2. REQUIREMENTS

Both parents or the child's legal guardian must appear. If only one parent appears, the second parent's notarized letter consenting to the passport issuance for the child must be submitted. The letter must be signed and notarized on the same day and must be accompanied by a coloured copy of the second parent's passport or state issued identification. If the second parent is deceased submit the Death Certificate.

The applicant **must** –

- Complete and sign the application form. The use of correction fluid is strictly prohibited.
- Submit evidence of the child's Trinidad and Tobago citizenship
- Produce his/her Trinidad and Tobago Identification Card/ Passport or State issued photo identification.
- Have the application form signed by an eligible recommender at Section 5 (if applicable)
- Submit the most recently issued passport in which the child's name appears, even if expired.
- Ensure that the name entered on the application form is the name the applicant wishes to appear in the passport.
- Provide evidence of any change in the child's name by submitting a **Deed Poll/Court Order**
- If the information on the application form differs from the information on the documentary evidence produced, the applicant may be required to submit a **Sworn Declaration** to clarify any differences.

3. CUSTODY OF CHILD

Separated or Divorced Parents

- The parent to whom custody of the child/children has been awarded must produce evidence of the Court Order and any other documentary evidence as may be required.

4. APPLICATION FEE AND VALIDITY OF PASSPORTS

Fees are paid by money order only and made payable to “Consulate General of Trinidad and Tobago”.

- Children aged 2 to 15 years – sixty (\$60.00) dollars
- Children under 2 years – twenty (\$20.00) dollars
- Postage (if required) – twelve (12.00) dollars

The maximum period of validity is **FIVE (5)** years from the date of issue.

5. REPLACEMENT OF LOST, STOLEN OR MUTILATED PASSPORT

Documents to be produced:

- Completed Child Passport Application Form.
- A Notification form for a Lost, Stolen or Mutilated Passport, which must be certified by a Commissioner of Affidavits or Justice of The Peace.
- One passport sized photograph.
- All documents which were submitted with previous application (Original Birth Certificate etc).
- An Incident report from Police Station in the Applicant's district stating that the loss was reported. (IF AVAILABLE)

- In the case of destruction by fire, a report from the Fire Authorities would be required in lieu of a Police certificate.
- Other documents as may be required at the time of interview for a replacement passport.

It is to be noted that the reported Lost, Stolen or Mutilated Machine Readable Passport will be de-activated upon submission of the relevant forms and as a result, would no longer be valid for travel.

3. NAME AND RELATIONSHIP OF APPLICANT ON BEHALF OF CHILD

I, **FIRST NAME** _____
SURNAME _____

Solemnly declare that I am the _____ of the child whose name is:
(RELATIONSHIP)

FIRST NAME _____

SURNAME _____

APPLICANT'S FULL ADDRESS

Street Name Town / City

Town / City Zip Code Country

Dated _____
Day / Month / Year

I.D. / Passport # of Parent / Legal Guardian _____

Signature of Parent/ legal Guardian

Date of Issue _____
Day / Month / Year



4. CUSTODY OF CHILD

(a) Has custody of the child been the subject of a Court Order? YES [] NO [] COURT ORDER NO. _____

DATED _____
Day / Month / Year

(b) If yes, include all Legal Documents referring to custody of the child.

5. DECLARATION OF RECOMMENDER * (To be completed by the Recommender Only) *

I, **FIRST NAME** _____

SURNAME _____

Solemnly declare that I am a citizen of Trinidad and Tobago and to the best of my knowledge and belief, all statements made in this application form are true. I make this declaration from my knowledge of the applicant whose name is :



NAME OF PARENT / LEGAL GUARDIAN

FIRST NAME _____

SURNAME _____

Whom I have known personally for _____ years, and from my knowledge of the child whose name is

CHILD'S NAME

FIRST NAME _____

SURNAME _____

And whose photograph I have certified on the reverse side (applicable to renewals only).

MY OCCUPATION _____

NAME OF FIRM / ORGANIZATION AND ADDRESS

Name of Firm / Organization

Street Name Town/ City

Town / City Zip Code Country

OFFICE TEL. NO. _____ **HOME TEL. NO.** _____

Dated _____
Day / Month / Year

I.D./ D.P. / PASSPORT # _____

Date of Issue _____
Day / Month / Year

Date of Expiry _____
Day / Month / Year

Signature of Recommender →



6. CITIZEN OF TRINIDAD AND TOBAGO BY:

(A) BIRTH []
 PIN NO. _____
 REGISTRATION DATE _____
Day / Month / Year

CERTIFICATE NO. _____
 REGISTRATION DISTRICT _____

(B) DESCENT []
 CERTIFICATE NO. _____

ISSUE DATE _____
Day / Month / Year

(C) ADOPTION []
 CERTIFICATE NO. _____

ISSUE DATE _____
Day / Month / Year

(D) REGISTRATION [] / NATURALISATION []
 CERTIFICATE NO. _____

ISSUE DATE _____
Day / Month / Year

IS THE CHILD NOW OR HAS EVER BEEN A CITIZEN OF ANY COUNTRY OTHER THAN TRINIDAD AND TOBAGO? YES [] NO []
 If yes, please provide details below

COUNTRY	CITIZENSHIP BY	CERTIFICATE NO.	ISSUE DATE (Date/Month/Year)
1.			
2.			
3.			

7. TRINIDAD AND TOBAGO PASSPORT(S) PREVIOUSLY

Has the child been issued any Trinidad and Tobago Passport(s) or other Trinidad and Tobago travel Documents? YES [] NO []

If YES, list in the Table provided and submit most recently issued document

PASSPORT NO.	DATE OF ISSUE (Date/Month/Year)	PLACE OF ISSUE

8. ADDITIONAL REFERENCES

Please provide the following information with respect to **two** persons who are not relatives and have known you for at least three years. These persons will be contacted to confirm your identity.

FIRST NAME _____

SURNAME _____

HOME ADDRESS or BUSINESS ADDRESS (IN FULL)

_____ **TEL. CONTACT** _____

FIRST NAME _____

SURNAME _____

HOME ADDRESS or BUSINESS ADDRESS (IN FULL)

_____ **TEL. CONTACT** _____

9. DECLARATION OF APPLICANT ON BEHALF OF CHILD

I _____ solemnly declare that :

- (i) The child is a Trinidad and Tobago citizen.
- (ii) The statements made in this application are true.
- (iii) The photographs enclosed are a true likeness of the child.
- (iv) he/she has no Trinidad and Tobago Passport other than the one(s) listed at section 7; and
- (v) I know the recommender for at least three years.

DATED _____
Day / Month / Year

I.D. / PASSPORT # _____

DATE OF ISSUE _____
Day / Month / Year



Signature of Parent / Legal Guardian

FOR OFFICIAL USE ONLY

PREQUALIFICATION OFFICER _____

DATE ____/____/____
Day Month Year

BIRTH CERTIFICATE INFORMATION
COMPUTER GENERATED CERTIFICATE []

PIN NO. _____ CERTIFICATE NO. _____

REGISTRATION DISTRICT _____ REGISTRATION DATE ____/____/____
Day Month Year

ENTRY NO. _____

MANUAL CERTIFICATE []

CERTIFICATE NO. _____

REGISTRATION DISTRICT _____ REGISTRATION DATE ____/____/____
Day Month Year

ENTRY NO. _____ VOL. NO. _____ PAGE NO. _____

CHAPTER _____ SECTION _____

CITIZENSHIP BY DESCENT CERTIFICATE INFORMATION

CERTIFICATE NO. _____ ISSUE DATE ____/____/____
Day Month Year

CHAPTER _____ SECTION _____

ADOPTION CERTIFICATE INFORMATION

CERTIFICATE NO. _____

ENTRY NO. _____ BOOK NO. _____ PAGE NO. _____

MARRIAGE CERTIFICATE INFORMATION

CERTIFICATE NO. _____ ISSUE DATE ____/____/____
Day Month Year

ENTRY NO. _____ VOL. NO. / BOOK NO. _____ FOLIO NO. / PAGE NO. _____

REGISTRATION / NATURALISATION CERTIFICATE INFORMATION

CERTIFICATE NO. _____ ISSUE DATE ____/____/____
Day Month Year

CHAPTER _____ SECTION _____

SWORN DECLARATION _____ **DATED** ____/____/____ **REF.** _____
(NAME OF DECLARANT) Day Month Year

SWORN DECLARATION _____ **DATED** ____/____/____ **REF.** _____
(NAME OF DECLARANT) Day Month Year

SWORN DECLARATION _____ **DATED** ____/____/____ **REF.** _____
(NAME OF DECLARANT) Day Month Year

DEED POLL NO. _____ **DATED** ____/____/____
Day Month Year

DECREE ABSOLUTE _____ **DATED** ____/____/____
Day Month Year

OTHER INFORMATION (Where Necessary)

OFFICER'S STAMP

RECEPTION OFFICER _____

DATE ____/____/____
Day Month Year