

APPLICANT CHECKLIST
1st ISSUE OF THE NEW MACHINE READABLE PASSPORT

All applicants for the first issue of the Machine Readable Passport (MRP), i.e. persons who were issued passports prior to January 2008, and who reside within our Consular Jurisdiction (Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee and Texas) are **required** to schedule an appointment and **APPEAR IN PERSON** at the Consulate General in Miami, Florida.

Appointments may be scheduled via Telephone: (305) 374-2199 Ext. 317, or requested via Email: consulatemiami@foreign.gov.tt. You **must** provide the PIN number located at the top left of your Trinidad and Tobago Computerized Birth Certificate, in order to confirm your appointment.

NOTE: YOUR PASSPORT PHOTO WILL BE TAKEN AT YOUR APPOINTMENT AT NO ADDITIONAL COST

ALL ORIGINAL DOCUMENTS AND TWO (2) COLOR PHOTOCOPIES OF EACH (excluding Application Form) MUST BE PRESENTED AT THE TIME OF YOUR APPOINTMENT – NO EXCEPTIONS

- **Current Trinidad and Tobago Passport**
 - and two (2) color photocopies of the Bio-data page (*photo page in passport, including adjoining page*)
- **Completed Application Form (all relevant areas completed)**
 - must be printed on Legal-size paper, front and back -Forms are also available at the Consulate General
 - signature must be consistent and not extend outside of the signature box
 - Section 4- 'Declaration of Recommender' - Please leave section blank
- **Trinidad and Tobago Computerized Birth Certificate**
 - Birth Certificates issued without a 'Given Name' must have a name insertion done prior to applying for a Machine Readable Passport (MRP) - **Call: 1-(868)-223-2452 for further information**
- **Marriage Certificate for EACH Marriage – NOT Church copy (applicable only to women)**
- **Divorce Decree (Absolute)/ Final Judgment for EACH Divorce (applicable only to women)**
- **Name Change Certificate or Deed Poll (if applicable)**
- **Evidence of Citizenship for all countries of which you are a Citizen:**
 - (eg. United States Naturalization Certificate or Alien Registration Card (Green Card)
 - (eg. Canadian citizens must provide Naturalization Certificate which provides the date you obtained citizenship
 - **ANYONE WHO BECAME A CITIZEN OF ANOTHER COUNTRY PRIOR TO JULY 29, 1988 MUST FIRST APPLY FOR RESTORATION OF TRINIDAD AND TOBAGO CITIZENSHIP**
- **Restoration Certificate (if applicable)**
- **Birth Certificate - if citizenship of Trinidad and Tobago was obtained other than by Birth (if applicable)**

ALL FOREIGN LANGUAGE DOCUMENTS MUST BE TRANSLATED INTO ENGLISH BY A LEGAL FOREIGN LANGUAGE TRANSLATION SERVICE

IF YOU WERE BORN OUTSIDE OF TRINIDAD & TOBAGO AND ARE A CITIZEN THROUGH OTHER PROVISIONS, YOU MUST SUBMIT THE FOLLOWING, IN ADDITION TO THE ABOVE APPLICABLE DOCUMENTS

DESCENT- All items listed above for both the applicant and the applicant's parent, who holds citizenship of Trinidad and Tobago

REGISTRATION- Certificate of Registration and Birth Certificate

NATURALIZATION- Certificate of Naturalization and Birth Certificate

ADOPTION- Certificate of Adoption with PIN number and letter from the Adoption Board/ evidence of Place of Birth

COST OF PASSPORTS

Regular 32-page Book - US\$60.00
Business 48-page Book - US\$76.00

Under Age 2 - FREE -US\$20.00 Diplomatic Fee applies
Over Age 60 - FREE -US\$20.00 Diplomatic Fee applies

Replacement of a valid Lost, Stolen, Tampered or Mutilated Book - US\$60.00-US\$180.00 (TBD)

Payment Options: Within US Territories -Money Order/ Postal Order/Banker's Check. Outside US Territories - Money Order/Postal Order ONLY made payable to: Consulate General of Trinidad and Tobago (PERSONAL CHECKS ARE NOT ACCEPTED)

POSTAGE FEE FOR PASSPORTS

Nationals within US Territories:

Postage Fee- US\$10.40

Passport Fee and Postage Fee may be combined in one Money Order (\$60.00 + \$10.40 = \$70.40)

Nationals outside of US Territories:

You must provide your own Legal-size, self-addressed and stamped envelope for postage, or **PREPAID** Mailing Label (eg. FedEx/ UPS)

ONE MONEY ORDER PER APPLICANT

BUSINESS HOURS: MON – FRI 9:30AM – 2:30PM



APPLICATION FORM FOR TRINIDAD AND TOBAGO PASSPORT INFANT / CHILD (FOR A CHILD UNDER 16 YEARS)

PLEASE PRINT INFORMATION IN BLOCK LETTERS
USING DARK BLUE OR BLACK INK PEN

WARNING TO ALL APPLICANTS AND RECOMMENDERS
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 fine and imprisonment.

FOR OFFICIAL USE ONLY

| | | | |
|-------------------------|------------------------------|-----------------|---------------------|
| PASSPORT TYPE _____ | ORIGIN _____ | RECEIPT # _____ | PASSPORT # _____ |
| EXPEDITED _____ | PICK UP _____ | DATE _____ | DATE OF ISSUE _____ |
| PRE-PAID SHIPPING _____ | REASON FOR APPLICATION _____ | | VALID TO _____ |

1. CHILD'S NAME

SURNAME _____

FIRST NAME _____

MIDDLE NAME(S) _____

FORMER NAME

SURNAME _____

FIRST NAME _____

MOTHER'S MAIDEN NAME

SURNAME _____

FATHER'S FULL NAME

SURNAME _____

FIRST NAME _____

2. PERSONAL INFORMATION

DATE OF BIRTH _____ / _____ / _____ SEX MALE [] FEMALE []

PHOTOGRAPH

PLACE OF BIRTH _____
TOWN / CITY

COUNTRY

HEIGHT (CM) _____ COLOUR OF EYES _____

HAIR COLOUR _____

HOME ADDRESS

Street Name Town/ City

Town / City Zip Code Country

MAILING ADDRESS (IF DIFFERENT FROM HOME ADDRESS)

Street Name Town/ City

Town / City Zip Code Country

PARENT'S WORK ADDRESS

Street Name Town/ City

Town / City Zip Code Country

NAME OF FIRM / ORGANIZATION

HOME TEL. NO. _____

Specimen Signature of child

PARENT'S MOBILE NO. _____

OFFICE TEL. NO. _____

PARENTS E-MAIL ADDRESS _____



(*N.B. * This form will become void if the Specimen Signature touches the border)

DO NOT BEND OR FOLD

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

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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