



BELIZE PASSPORT APPLICATION

Please read the instructions overleaf before completing form.

Section 1.

Surname/Family name		First & middle names	
Date of birth (day/month/year) / /		Place of birth (city & country)	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Marital Status: Single <input type="checkbox"/> ; Married <input type="checkbox"/> ; Divorced <input type="checkbox"/> ; Widowed <input type="checkbox"/>	Maiden name (Of married women)	
Has name been changed (other than by marriage; e.g. deed poll)? If so, state original name.			
Home address		If home address is not in Belize, address whilst in Belize	
Phone no. ---		Phone no. ---	
Occupation	Residence (country)	Height feet inches	Colour of eyes
Colour of hair	Distinguishing marks/ Special peculiarities		

Section 2. Married women (including divorcees and widows) are to complete this section.

Full name of husband	Husband's nationality	Husband's date of birth
Husband's place of birth	Place of marriage	Date of marriage

Section 3. Citizens of Belize by naturalization are to complete this section.

Number of nationality document	Date of issue of document	Place of issue of document
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Section 4. Declaration (Please tick all those that apply.)

- I, the undersigned, hereby apply for the issue of a Belize passport. I declare that:
- (A) The information given here is correct to the best of my knowledge and belief;
- (B) I have not lost the status of citizen of Belize;
- From the below, please choose that which is applicable.**
- (C) I have not previously held or applied for a Belize Passport;
- (D) Attached is passport number _____ issued at _____ on ____/____/____ (day/month/year), I have not made another application for a Belize passport since it was issued and I have surrendered all previous passports;
- (E) Unavailable for presentation is passport number _____ issued at _____ on ____/____/____ (day/month/year). I have attached a statutory declaration attesting to its loss, destruction or being stolen.

<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Signature (within but not touching edges of box) </div>	Date ____/____/____ (day/ month/ year)
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Section 5. Recommender

I, (Mr., Mrs., Miss) _____ certify that the applicant has been known to me
(Name in print of recommender)

for _____ years and that to the best of my knowledge and belief, the facts above are correct.

Signature _____ Date _____

Profession _____ Address _____