INSTRUCTION SHEETS

COMMONWEALTH CITIZENS

1. Form to be completed and signed by a Justice of the Peace or Notary Public.

2. Reference letter from a reputable person in country of birth or residence and Grenada.


4. Police Certificate of Character from country of origin and residence. Must be dated within 6 months of application.

5. Four passport size photographs (50mm×50mm) of the applicant CERTIFIED by a Justice of the Peace or Notary Public: “I certify that this is a true likeness of.....................”

6. ORIGINAL and ONE (1) PHOTOCOPY of Birth Certificate. If name does not appear on Birth Certificate an ORIGINAL Affidavit is required.

7. Letter stating date of arrival in Grenada, purpose of visit, the activities engaged in and reason why applicant would like to be a citizen.

8. Medical Certificate from a Registered Practitioner, which includes:-

   a. Chest X-Ray
   b. Malaria Blood Smear
   c. Serum Creatinine
   d. RPR, VDRL or other serologic test for Syphilis
   e. Stool for culture and Microscopic examination
   f. HIV antibody test
   g. Update immunization status including measles, mumps, rubella, tetanus and hepatitis B- 3 dose
      *Immunization card MUST be produced.
      Copy of Immunization card.
   h. Mantoux (TB) test

The Medical Report MUST be done at any MEDICAL FACILITY in Grenada.
NB: Applicant parents name and nationality, Applicant’s Occupation, Contact Number should be included on application form, a copy of Permanent Residence Certificate & copy of Passport

Fees:  Security Check-$275.00  Application-$100.00  Citizenship-$3,000.00
N.B. Portions of this form which are not applicable must be struck out and initialled in every case.

CAUTION: To give false information on this form, purposely or recklessly is a criminal offence punishable with imprisonment. (Section 14-Grenada Citizenship Act, 1976).

1. I, ............................................................... of .................................................................
   (Name) (Present Address)
   full age and capacity and was born at ................................................................. in the parish
   of ................................................................. on .................................................................
   (Date)

2. My father’s full name (is) (was) .................................................................
   and he was born at ................................................................. in the parish of .................................................................
   on .................................................................
   (Date)

3. I am (single) (married) (a widower) (a widow) (divorced from my wife/husband).

4. My (Wife’s) (Husband’s) full name (is) (was) .................................................................
   and (she) (he) was born at ................................................................. in the parish
   of ................................................................. on .................................................................
   (Date)

5. (a) I am a Citizen of the following country or countries:—

   (b) Grounds on which the applicant claims to be such a Citizen:—

6. (a) I am ordinarily resident in Grenada and intend, if registered, to reside in
   Grenada ................................................................. (Please check if applicable).

   AND/OR

   (b) I am in the service of the Government of Grenada and intend, if registered, to continue in the
   service of the Government of Grenada
   (Please check if applicable).
7. (a) I have been ordinarily resident in Grenada during the past five years as follows:

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<th>From</th>
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AND/OR

(b) I have been in the service of the Government of Grenada during the past five years as follows:

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<th>Department</th>
<th>Capacity</th>
<th>From</th>
<th>To</th>
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8. The special circumstances in which I desire that the period of ordinary residence or service in the Government of Grenada shorter than five years which is mentioned in paragraph 7 above would be accepted are as follows:

9. I (have) (have not) previously (a) renounced or (b) been deprived of citizenship of Grenada.

(a) The DECLARATION OF RENUNCIATION of citizen was made on ....................................

OR

(b) The ORDER OF DEPRIVATION of citizenship was made on ............................................ (Date)

10. I, ................................................., do solemnly and sincerely declare that the foregoing particulars stated in this application are true, and I make this solemn declaration conscientiously believing the same to be true.

(Applicant’s Signature)

Date of Application (Day-Month-Year)

Made and subscribed this ........ day of .................: ..................20................ before me,

(Signature of Justice of the Peace, Notary Public or other Official.)

For Official Use Only—Please Do Not Write In This Space

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<th>Photo</th>
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Amount of Fees Paid: $....................
Certificate Issued: ............................
Examining/Issuing Officer(s): ..................

Date: .............................................