

REPUBLIC OF TRINIDAD AND TOBAGO
PASSPORT EXTENSION

Form "C"

(see Notes overleaf before completion)

1.	<p>Name (Family or last name): <input style="width: 100%;" type="text"/></p> <p>First Name: <input style="width: 100%;" type="text"/></p> <p>Middle Name(s): <input style="width: 100%;" type="text"/></p> <p>Maiden Name (Family name at birth): <input style="width: 100%;" type="text"/></p> <p>Former Name (if changed) <input style="width: 100%;" type="text"/></p>																														
2.	<p>Personal Information</p> <p>Date of Birth: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> Country of Birth: <input style="width: 150px;" type="text"/> <small>Year Month Day</small></p> <p>Sex: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> Height: <input style="width: 40px;" type="text"/> CM Hair Colour: <input style="width: 60px;" type="text"/> Eye Colour: <input style="width: 60px;" type="text"/> <small>M F</small></p> <p>Marital Status: (State Yes/No whichever is applicable)</p> <p style="text-align: center;"> <input style="width: 60px;" type="text"/> <input style="width: 60px;" type="text"/> <input style="width: 60px;" type="text"/> <input style="width: 60px;" type="text"/> <input style="width: 60px;" type="text"/> <small>Single Married Widowed Divorced Separated</small> </p> <p>Occupation/Profession: <input style="width: 100%;" type="text"/></p>																														
3.	<p>Address in Detail:</p> <p>(a) Permanent Address: (Home) (b) Work Address: (or address in Trinidad and Tobago if resident outside Trinidad and Tobago)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border: 1px solid black; padding: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><i>No.</i></td> <td style="width: 40%;"><i>Street</i></td> <td style="width: 40%;"><i>District</i></td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table> </td> <td style="width: 50%; border: 1px solid black; padding: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><i>No.</i></td> <td style="width: 40%;"><i>Street</i></td> <td style="width: 40%;"><i>District</i></td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table> </td> </tr> <tr> <td style="padding: 5px;">Telephone: <input style="width: 150px;" type="text"/></td> <td style="padding: 5px;"><input style="width: 150px;" type="text"/></td> </tr> <tr> <td style="text-align: center;"><small>Home</small></td> <td style="text-align: center;"><small>Business</small></td> </tr> </table>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><i>No.</i></td> <td style="width: 40%;"><i>Street</i></td> <td style="width: 40%;"><i>District</i></td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>	<i>No.</i>	<i>Street</i>	<i>District</i>										<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><i>No.</i></td> <td style="width: 40%;"><i>Street</i></td> <td style="width: 40%;"><i>District</i></td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>	<i>No.</i>	<i>Street</i>	<i>District</i>										Telephone: <input style="width: 150px;" type="text"/>	<input style="width: 150px;" type="text"/>	<small>Home</small>	<small>Business</small>
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4.	<p>Citizenship Information</p> <p>Date of Registration or Naturalisation: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> Certificate No: <input style="width: 100px;" type="text"/> Place of Issue: <input style="width: 100px;" type="text"/> <small>Year Month Day</small></p> <p>Do you hold Citizenship of another Country Yes <input type="checkbox"/> No <input type="checkbox"/></p>																														
5.	<p>Particulars of Passport to be renewed:</p> <p>Number: <input style="width: 150px;" type="text"/> Date of Issue: <input style="width: 150px;" type="text"/> Place of Issue: <input style="width: 150px;" type="text"/></p>																														

6. Declaration:

I hereby apply for the renewal of the passport issued to me and declare that all the particulars given by me in respect of this application, are true. I further declare that I have no other valid passport in my possession.

.....
Date

.....
Signature of Applicant

7. Declaration on behalf of a Person under 18 years:

I hereby apply for the renewal of the passport issued to *(state child's name below)*:

.....
and declare that all the particulars given in respect of this application are true. I further declare that he/she has no other valid passport issued to him/her.

.....
Date

.....
*Signature of Parent /
Legal Guardian*

NOTES

1. No fees applicable.
2. One (1) photograph required.
3. Passports can be extended regardless of the age of the bearer.
4. Passports which have no further space for visas cannot be extended, and the holder must apply for the grant of new passports.
5. A child registered as a citizen of the Republic of Trinidad and Tobago after 31st July, 1976 must take the oath of allegiance. Failure to do so within one (1) year after attaining full age, he/she shall cease to be a citizen of the Republic of Trinidad and Tobago.

FOR OFFICIAL USE ONLY

Applicant seen by.....

Renewal approved by.....

Specimen Signature of Holder of Passport which will be detached and affixed to the Passport when renewed.

