BELIZE Application for Passport



Sign within white space only

PHOTO BOX (for office use only)

(Use dark blue or black ink)

Base Fee Renewal or Replacement Priority Level (New or Renewal) Urgent Medical Expedited **Passport Type** Adult Child Lost or Stolen (24 hour) \$200 \$150 \$200 Regular \$300 \$100 Temporary \$100 \$100

DO NOT SUBMIT INSTRUCTIONS WITH YOUR APPLICATION!

IMPORTANT:

• Fees are in Belize dollars (BZD) and are cumulative.

SIGNATURE BOX

 $\bullet \ \ \ \ \, \text{Visit the Immigration website} \ \ \underline{ www.immigration.gov.bz/passport} \ \text{for complete information.}$

• Section 7 is for Recomr	menders (not the A	Applicant)										
APPLICATION DETA	AILS (for office u	ise only)										
Document Type:	ePassport			Regular		Stan	dard					
		emporary)	ePassport Type:	Diplomatic	Processing Tin	ne: 24 h	our					
	Passport (Temporary)			Official		Urge	nt					
	New (first-ti	ime)										
Application Reason:	Renewal	Renewal										
	Replacemer	nt (lost	stolen c	damaged name	change)							
	Applicant											
Submitted by:	Parent/Lega	l Guardian										
	Authorized F	Person										
Application Location:												
Pickup Location:												
1) PERSONAL INFO	RMATION											
Surname:			Maiden Surna	me:	Given Name(s):							
Title: Mr. Mrs. N		Other:	Date of Birth: (DD-MM-YYYY)		Original Name or Aliases:							
Title.	Mrs. Ms.	other										
Gender: M F		Place of Birth:	:		Country of Birth:							
Eye Colour:		Hair Colour:			Height:	(feet)	(inches)					
Visible identification mar	ks (in detail):											
Profession/Occupation/[Designation:											
2) CONTACT INFOR	RMATION											
Local Phone No.:				International Phone	e No.:							
Email:												
	PERMANENT AD	DRESS			CURRENT ADDRESS	Same as per	manent address					
Street/Village:				Street/Village:								
P.O. Box: City:				P.O. Box: City:								
District/State:				District/State:								
Zip/Postal Code:				Zip/Postal Code:								
Country:				Country:								
3) CITIZENSHIP												
Citizenship acquired by?	Birth	Descent	Adoption	Registration								
Certificate No. refers to:	(Birth, Descent, Ad	doption, Registra	ation) Place of	n) Place of Issue:			Date of Issue: (DD-MM-YYYY)					

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BELIZE

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4) SPOUSE DE	:TAILS <i>(for nam</i>	e change, pl	ease provide n	nost recer	nt relationship informa	ation)				
Marital Status:	Single	Married	Divorced	Wi	dow(er)					
Spouse's Surname:			Spouse's Given Name(s):			Place of Marriage:	Date of Marriage: (DD-MM-YYYY)			
Spouse's Date of E	Birth: <i>(DD-MM-YYYY)</i>	1	Spouse's Nationality:			Spouse's Place of Birth:				
5) LOST OR ST	TOLEN PASSPC	DRT <i>(if appli</i>	cable)							
Passport No.: (if ki		Date of Lo			Place of Loss:		Country of Loss:			
		(DD-MM-YY	YY)		1,1400 0, 2000.					
Police Station/Belize High Commission/Consu			Immigration Of	fice:	Case Report No.:		Report Date: (DD-MM-YYYY)			
Comments:										
I certify that the	above particular	s are correct	and undertak	e in the						
,	, ,	, ,	ny possession to return it							
to the Belize Pas Commission/Cor	sport Office or to asulate	a Belize Hig	h		Sign	ature	Date (DD-MM-YYYY)			
6) DECLARATI					5		,			
	ardian of a child	under 16 ye	ars of age:	_						
This is to certify a passport.	that I am the Par	ent or Legal	Guardian of t	he child. I	hereby give my conse	nt to the Belize Passpo	ort Office to issue him/her			
Relationship to Ch	nild:		Father	Mother	Legal Guardi	an	Date of Birth: (DD-MM-YYYY)			
Marital Status:			Single	Married	Divorced	Widow(er)				
Place of Birth:					Nationality:					
Parent/Legal Guar	dian Surname:	Pai	Parent/Legal Guardian Given Name(s):							
							Signature			
ID Type:		ID	No.:							
						Date	· (DD-MM-YYYY)			
I, the undersigne	ed Applicant here	eby apply for	the issue of a	Belize pa	ssport, I declare that	(check all that apply):				
I, the undersigned Applicant hereby apply for the issue of a Belize passport, I declare that (check all that apply): NOTE: If you have had a passport that has been lost or stolen, do not check boxes C and D, and ensure to complete Section 5 of this form.										
A – The info	rmation provided	l in this appli	cation is corre	ct to the l	best of my knowledge	and belief.				
B – I have no	ot lost the status	of Citizen of	Belize.							
C – I have no	ot previously held	or applied fo	or a Belize pas	sport.						
	l is passport no.:		issued			on DD-MM-YYYY				
	application for Be able for presentat				d I have surrendered a issued at	ll previous Belize pass on	ports. D-MM-YYYY . I have			
					tion or being stolen.	OII D	D-IVIIVI-TTTT .TTIQVE			
	Sign	nature				Date (DD-MM-YYY	·/)			
7) SUPPLEME	NTAL INFORM						,			
Comments:										
Comments:										
Comments:										
Comments:										
Comments:										
Comments:										

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