

GOVERNMENT OF SAINT CHRISTOPHER AND NEVIS

Registration for Citizenship by Descent under sections 90 (c), 90(f) and

91(b) of the St Kitts and Nevis Constitution

APPLICANT'S DETAILS – (PLEASE PRINT)

SURNAME:		SEX:	M	F	
FIRST & OTHER N	AMES:				
MAIDEN NAME:					
DATE OF BIRTH:			DD	MM	YYYY
PLACE OF BIRTH:				<u> </u>	
PRESENT ADDRES	S:				
HAS APPLICANT LIVED IN ANY OTHER PLACE IN THE LAST TEN(10) YEARS				Ν	
IF "YES" LIST A	DDRESSES AND DATES (USE ADDITIONAL S	SHEET OF PAPER IF	NEEDED)		
DATE		ADDRESSES			
OCCUPATION:					
AS APPLICANT EVER BEEN CONVICTED OF A CRIME?		Y	Ν		
IF "YES" GIVE DE	TAILS (USE ADDITIONAL SHEET IF NEEDE	D)			

PARENT'S DETAILS: (Information for BOTH parents MUST be included)

MOTHER: MOTHER'S NAME:			
MOTHER'S PLACE OF BIRTH:			
MOTHER'S DATE OF BIRTH:	DD	MM	YYYY
USUAL PLACE OF RESIDENCE:			

FATHER:			
FATHER'S NAME:			
FATHER'S PLACE OF BIRTH:			
FATHER'S DATE OF BIRTH:	DD	MM	ҮҮҮҮ
USUAL PLACE OF RESIDENCE:			

GRANDPARENTS: (If citizenship is being gained through a grandparent, parent's birth

certificate with grandparent's name MUST be included).

GRAND MOTHER

NAME:				
PLACE OF BIRTH:	DATE OF BIRTH	DD	ММ	YYYY
USUAL PLACE OF RESIDENCE:				

GRAND FATHER

NAME:				
PLACE OF BIRTH:	DATE OF BIRTH	DD	ММ	YYYY
USUAL PLACE OF RESIDENCE:		·		

Date of Application

Signature

(Parent must sign if applicant is under age 16)

Signature.....

Parent's Name.....

(PLEASE PRINT)