



DO NOT WRITE IN THIS SPACE

PLEASE ATTACH TWO RECENT PHOTOGRAPHS OF THE APPLICANT IN THIS BOX

APPLICATION FORM FOR SAINT LUCIA NONIMMIGRANT VISA

SECTION 1

SURNAME (AS IN PASSPORT)			FIRST AND MIDDLE NAMES (AS IN PASSPORT)		
OTHER NAMES (IN FULL) THAT YOU ARE KNOWN BY			MAIDEN NAME/OTHER SURNAMES USED		
DATE OF BIRTH (DD/MM/YYYY)	PLACE OF BIRTH (CITY/VILLAGE)	(STATE/PROVINCE)	COUNTRY	NATIONALITY	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Current Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated
PASSPORT NUMBER	PLACE OF ISSUE	DATE OF ISSUE (DD/MM/YYYY)	DATE OF EXPIRY (DD/MM/YYYY)	NATIONAL INSURANCE/IDENTIFICATION NUMBER (IF APPLICABLE):	
PERMANENT HOME ADDRESS			CORRESPONDENCE ADDRESS, IF DIFFERENT FROM HOME ADDRESS		
TELEPHONE: HOME	WORK	MOBILE	FAX	E-MAIL	

SECTION 2

NAME, ADDRESS AND TELEPHONE NUMBER OF PRESENT EMPLOYER OR SCHOOL		YOUR PROFESSION	YOUR PRESENT OCCUPATION
WHEN DO YOU EXPECT TO TRAVEL TO SAINT LUCIA?	WHAT IS THE PURPOSE OF YOUR TRAVEL TO SAINT LUCIA? <input type="checkbox"/> BUSINESS <input checked="" type="checkbox"/> HOLIDAY <input type="checkbox"/> VISITOR IN TRANSIT <input type="checkbox"/> OTHER (PLEASE GIVE DETAILS):	HOW LONG DO YOU INTEND TO STAY IN SAINT LUCIA?	
AT WHAT ADDRESS WILL YOU STAY IN SAINT LUCIA? (HOTEL/PRIVATE HOME? PLEASE GIVE FULL ADDRESS)			
IF YOU ARE STAYING AT A PRIVATE ADDRESS, PLEASE GIVE THE NAME, RELATIONSHIP AND TELEPHONE NUMBERS OF THE PERSON IN SAINT LUCIA WITH WHO YOU WILL STAYING.			
NAME:	RELATIONSHIP:	TELEPHONE NUMBER (HOME)	TELEPHONE NUMBER (WORK)
HAVE YOU BEEN TO SAINT LUCIA BEFORE? Y/N	WHEN?	FOR HOW LONG?	HOW MUCH MONEY WILL YOU TAKE FOR YOUR PROPOSED VISIT?

SECTION 3

IF YOU ARE MARRIED, WHAT IS YOUR SPOUSE'S NAME?	IS YOUR SPOUSE TRAVELLING WITH YOU? <input type="checkbox"/> YES, ON MY PASSPORT <input type="checkbox"/> YES, ON HIS/HER OWN PASSPORT IF YES, PLEASE PROVIDE HIS/HER PASSPORT NUMBER: _____
WILL YOUR CHILDREN BE ACCOMPANYING YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION, PLEASE PROVIDE YOUR CHILD'S/CHILDREN'S DETAILS BELOW:	
FULL NAME _____	DATE AND PLACE OF BIRTH _____ PASSPORT NUMBER _____
FULL NAME _____	DATE AND PLACE OF BIRTH _____ PASSPORT NUMBER _____
FULL NAME _____	DATE AND PLACE OF BIRTH _____ PASSPORT NUMBER _____
FULL NAME _____	DATE AND PLACE OF BIRTH _____ PASSPORT NUMBER _____

SECTION 4 • FOR APPLICANTS TRAVELLING THROUGH THE UNITED KINGDOM ONLY

DO YOU REQUIRE A VISA FOR ENTRY TO THE UNITED KINGDOM? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU APPLIED FOR A UNITED KINGDOM VISA? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU BEEN ISSUED A VISA FOR ENTRY TO THE UNITED KINGDOM? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YOU HAVE ANSWERED "YES" TO THE QUESTIONS ABOVE, PLEASE ANSWER THE QUESTIONS, BELOW.			
WHERE WAS YOUR VISA APPLICATION MADE?	WHEN WAS THE VISA APPLICATION MADE?	WHAT KIND OF VISA DID YOU APPLY FOR?	WHAT IS THE REFERENCE NUMBER AND EXPIRATION DATE OF YOUR UNITED KINGDOM VISA?

SECTION 5

WAS THIS APPLICATION PREPARED BY ANOTHER PERSON ON YOUR BEHALF? <input type="checkbox"/> YES <input type="checkbox"/> NO	APPLICATION PREPARED BY: NAME: _____ RELATIONSHIP TO APPLICANT: _____ ADDRESS: _____
SIGNATURE OF PERSON PREPARING FORM	DATE (DDMMYYYY)

I CERTIFY THAT I HAVE READ AND UNDERSTOOD ALL THE QUESTIONS SET FORTH IN THIS APPLICATION AND THE ANSWERS I HAVE FURNISHED ON THIS FORM ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I ALSO DECLARE THAT THE PHOTOGRAPHS SUBMITTED WITH THIS FORM ARE A TRUE LIKENESS OF MYSELF. I UNDERSTAND THAT ANY FALSE OR MISLEADING STATEMENT MAY RESULT IN THE PERMANENT REFUSAL OF A VISA AND DENIAL OF ENTRY INTO SAINT LUCIA. I UNDERSTAND THAT POSSESSION OF A VISA DOES NOT AUTOMATICALLY ENTITLE THE BEARER TO ENTER SAINT LUCIA UPON ARRIVAL AT THE PORT OF ENTRY IF HE OR SHE IS FOUND INADMISSIBLE.

APPLICANT'S SIGNATURE: _____ DATE: _____

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<input type="checkbox"/> VISA ISSUED	<input type="checkbox"/> VISA REFUSED	DATE: _____	TYPE OF VISA ISSUED _____	ENDORSED BY: _____
PLACE OF ISSUE: _____		VISA VALID FROM: _____ TO: _____ VISA NUMBER: _____		