

CITIZENSHIP OF THE REPUBLIC OF TRINIDAD AND TOBAGO ACT, CHAP. 1:50

APPLICATION FOR RESTORATION OF CITIZENSHIP UNDER SECTION 11(2a) OF THE ACT

NOTE: Applicants are requested to submit-

- (a) three (3) completed copies of this Form
- (b) four (4) identical passport size photographs
- (c) a police certificate of character
- (d) medical forms 40 and 40(a)
- (e) evidence of birth in Trinidad and Tobago
- (f) evidence of acquisition of citizenship of the country of present nationality.

SURNAME

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FIRST NAME

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MIDDLE NAME(s)

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FORMER NAME

*(If original name
has been changed)*

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MAIDEN NAME

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DATE OF BIRTH

--	--	--	--

Year

--	--

Month

--	--

Day

COUNTRY OF BIRTH

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PRESENT NATIONALITY

DATE OF ACQUISITION

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Year

--	--

Month

--	--

Day

ADDRESS IN DETAIL

(a) Permanent Address (Home)

*(b) Former Address in Trinidad and Tobago if
resident outside of Trinidad and Tobago*

PARTICULARS OF PRESENT FOREIGN PASSPORT

No. Date of Issue Place of Issue

OCCUPATION

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PROFESSION

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Have you been convicted of any offences other than traffic offences?

Yes No

If Yes list all offences and dates committed on a separate sheet of paper and attach to this application.

I have attached hereto completed medical forms as prescribed

Yes No

Ihereby apply for restoration of my citizenship of Trinidad and Tobago and declare that the foregoing particulars are true and correct.

.....
Signature of Applicant

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

.....
(Name in Block Letters)

.....
Signature

.....
Official Title

CAUTION: A person who, for the purpose of procuring anything to be done or not be done in connection with the provisions of this Act knowingly or recklessly makes a statement which is false in a material particular is, without prejudice to any other proceedings that might be taken against him, guilty of an offence and liable on summary conviction to a fine of one thousand dollars or to imprisonment for six months or to both such fine and imprisonment.