



**GRENADA**  
**IMMIGRATION AND PASSPORT DEPARTMENT**  
**FIRST TIME APPLICANTS**  
**TRAVEL DOCUMENT QUESTIONNAIRE**

What is your name and surname? .....

What other names are you known by? .....

What is your date of birth? **D /M** What is your ..... **/Y**.....

present address? .....  
.....

What is your occupation? .....

Did you ever travel overseas? **Yes**  **No**

If above question is **yes**, state the countries:

- .....
- .....
- .....

Are you the holder of a foreign travel document? **Yes**  **No**

If yes, state:

Country ..... Passport No. .... Expiry Date .....

Have you or anyone else applied for any Grenadian travel document on your behalf? **Yes**  **No**

If yes, state:

What document ..... when .....

Have you ever reported your travel document lost, stolen or damaged? **Yes**  **No**  **N/A**

If yes, state:

When ..... where .....

On ..... the ..... day of ..... 20 ....., I answer these questions consistent to the **Passport Act Chapter 226 of Volume VI of the 1990 revised Laws of Grenada**. Knowing that if it is tender in evidence I shall be liable to prosecution if I willfully stated in it anything, which I know to be false or do not believe to be true.

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*Signature*

**For Official Use Only:**

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*Officer Signature*

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*Date*