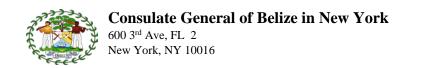
Tel: (646) 571-2530 Fax: (646) 571-2301

Email: info@congenbelize.gov.bz Website: http://congenbz-ny.gov.bz/

APPLICATION FORM FOR CONSULAR ID

Please read the requirements below before completing form.

| 1. | Last N | Last Name/s: | | | | |
|--|--|---|--|---------------------------|-----------------------------|--|
| 2. | First o | First or Given Name/s: | | | | |
| 3. | Date o | of Birth: | Day | Month | Year | |
| 4. | Place | of Birth: Nationality at Birth: | | | | |
| 5. | Profes | ssion/Occupation | | | | |
| 6. | Gende | er: Male | Female | Marital Status: | | |
| 7 | Ethnicit | у | Height | Weight | | |
| | Colour | Colour of Eyes Colour of Hair | | | | |
| 8. | Present | Present Address: | | | | |
| 9. | E-Mail | z-Mail Address: | | | | |
| | Contact Numbers: Home: Mobile/Cell Phone: | | | | | |
| | Emergency Contact: Name:PH# | | | | | |
| 11. | 11. Applicant's Signature (Please sign below, within the box, away from the lines) | | | | | |
| | Data | | | | | |
| | | | | Date:(dd/mm/yyy | y) | |
| Declaration (Please circle all that applies) | | | | | | |
| | (a) The information given here is correct to the best of my knowledge and belief;(b) I have not lost the status of citizen of Belize; | | | | | |
| | (c) I have no valid state issued photo identification; | | | | | |
| REQUIREMENTS FOR CONSULAR ID (Please note that incomplete applications will not be accepted) | | | | | | |
| | 1. | | note that incomplete ned application form | applications will not | be accepted) | |
| 12 | 2. | | ficate or nationality cer | tificate | | |
| | 3. | Valid government issued photo ID from Belize or USA (expired passport is accepted when | | | | |
| | | applying for Consular ID only) | | | | |
| | 4. | Proof of US address in the form of utility bill or lease/rent contract (if no utility bill or lease agreement for residence the person whose name is on utility bill or lease must provide a | | | | |
| 12. | | notarized declaration confirming that the applicant resides at address) | | | | |
| | 5. | Notarized "Certificate of Identity Form" (when requirements at no. 3 cannot be met) | | | | |
| | 6. | • | | | | |
| | 7. | ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | | | | |
| | | accompanied by their parent (II) Parent will need to present a valid photo ID 8. Married Women: (I) Original marriage certificate/license; (ii) Original Divorce Degree (if | | | | |
| | 8. | Married Women: applicable) | (I) Original marriage of | ertificate/license; (ii)C | original Divorce Degree (if | |



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*Completed application form with all necessary documents and fee must be presented personally at the Consulate General of Belize in New York's Office.

By appointments ONLY. Processing time 1 week.