

Mailing Address:

Department of Immigration
Government of the Virgin Islands
P. O. Box 2299
Road Town, Tortola VG1110
British Virgin Islands



GOVERNMENT OF THE VIRGIN ISLANDS
Immigration Department

Physical Address:

Department of Immigration
Government of the Virgin Islands
RJT Edifice Building, 2nd Floor
354 James Walter Francis Drive
Road Town, Tortola VG1110
British Virgin Islands

Tel.: (284) 468-4703/5

Fax: (284) 494-3471

ATTENTION! APPLICANT MUST COMPLETE THIS SECTION	NAME (Mr. / Mrs. / Ms. / Miss): _____
	IMMIGRATION FILE NO.: _____ WORK PERMIT NO.: _____ (If Applicable) (If Applicable)
	SOCIAL SECURITY NO.: _____
	POSTAL ADDRESS: _____
	CONTACT INFORMATION (TELEPHONE): (HOME) _____ (WORK) _____ (CELL) _____
	(EMAIL) _____

GUIDELINES FOR COMPLETING AN APPLICATION FOR BELONGER STATUS – 4th GENERATION BY DESCENT

ONLY a person who is a great-grandchild of a person, who is deemed to belong to the Virgin Islands by virtue of Section 2(d) of the Virgin Islands Constitution Order 2007, is eligible for consideration of this Belonger Status.

*Immigration and Passport (Amendment) (No.2) Act, 2019
*S.I. No.54 of 2019 Immigration and Passport (Amendment) Regulations 2019

Applicant **MUST** submit the following with the application for Belonger Status in the Virgin Islands to the Immigration Department:

1. Two (2) current passport size photographs.
2. A cover letter addressed to the Chief Immigration Officer, entailing:
 - a. Your (or parent in the case of a minor) reason(s) for seeking Belonger Status;
 - b. Information on any connections (family, property, business, etc) to the Virgin Islands; and
 - c. Your intended place of residence in or out of the Virgin Islands, if approved.
3. One original **local** or **international** police certificate (*not issued more than 6 months ago*).
4. **Original** or **certified copy** of your Birth Certificate.
5. **Original** or **certified copy** of your Adoption Certificate (*if applicable*).
6. **Original** or **certified copy** of Parent’s Birth Certificate (*which status is being received through*).
7. **Original** or **certified copy** of Grandparent’s Birth Certificate (*which status is being received through*).
8. **Original** or **certified copy** of Great-grandparent’s Birth Certificate (*which status is being received through*).

COMPLETION OF APPLICATION REQUIREMENTS

9. Applicant **MUST** complete **ALL** questions on the form attached hereto. The form **MUST** be signed by the applicant. The form **MUST** be notarized (by a Notary Public, Commissioner of Oaths, or Justice of Peace in the Territory of the Virgin Islands). The form **MUST** be returned with this page attached.

OFFICIAL USE ONLY





VIRGIN ISLANDS

FORM 4A

[Regulation 8A(1)]

APPLICATION FOR A CERTIFICATE THAT A PERSON BELONGS TO THE VIRGIN ISLANDS, WHERE SUCH PERSON IS A GREAT GRANDCHILD OF A PERSON WHO BELONGS TO THE VIRGIN ISLANDS UNDER SECTION 2(2)(d) OF THE CONSTITUTION.

1. Name of applicant (in block letters) _____
2. Place and date of birth _____

3. Nationality at birth _____
4. Country of which applicant is now a citizen _____
5. Passport number, Date and Place of issue _____

6. Date passport expires _____
7. Present physical address _____
8. Present Occupation _____
9. Religious denomination _____
10. Name of Parent from which Status is being sought _____

11. Maiden Name/ Previous Name(s) of parent (where applicable) _____

12. Place and Date of Birth of Parent from which Status is being sought _____

13. Name of Grandparent from which status is being sought _____

14. Maiden Name/ Previous Name(s) of Grandparent (where applicable) _____

15. Place and Date of Birth of Grandparent from which Status is being sought _____

16. Name of Great Grandparent from which status is being sought _____

17. Maiden Name/ Previous Name(s) of Great Grandparent (where applicable) _____

18. Place and Date of Birth of Great Grandparent from which Status is being sought _____

19. Any other information which the applicant considers may be of assistance to Cabinet
may be given _____

I, _____ (the above named applicant) hereby
certify that

(Print name)

all of the information I have furnished on this form is true and correct to the
best of my knowledge and belief, and all documents which I have supplied are
authentic. I understand that any **misleading** information may result in legal
action.

(Applicant's signature)

Dated the _____ day of _____ 20____.

Declared before me this _____ day of _____ 20____.

(Signature)

Notary Public/Justice of the Peace/Commissioner of Oaths

FOR OFFICIAL USE ONLY

Permit or Refusal issued on _____