

**Form 4 - A**

[Regulation 7(1)]

**DECLARATION OF RECOMMENDER  
FOR BELIZE PASSPORT APPLICATION  
FOR PERSONS UNDER 16 YEARS**

I, (Mr., Mrs., Miss) \_\_\_\_\_  
*[print full name of Recommender]*

of \_\_\_\_\_  
*[insert full address]*

and currently employed as \_\_\_\_\_ hereby declare/certify that I have been  
*[profession]*

acquainted with the child (Mr., Miss) \_\_\_\_\_  
*[print full name of Child]*

for the past \_\_\_\_\_ through (Specify relationship) \_\_\_\_\_  
*[number of years]*

\_\_\_\_\_  
*[Group A – Justice of the Peace, Minister of Religion, Medical Practitioner, Notary Public, or Attorney-at-Law.]*

and that the information provided in his/her Belize passport application is true and correct to the best of my knowledge, information and belief.

Signature of Recommender: \_\_\_\_\_

Official Stamp/Seal:

Date: \_\_\_\_\_  
*[day / month / year]*

Tel Office/Work: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_