



CONSULATE GENERAL OF SAINT LUCIA

EMERGENCY TRAVEL DOCUMENT INSTRUCTION GUIDE

In order to complete the processing of an Emergency Travel Document the following must be provided:

1. A completed Emergency Travel Document Application form.

2. Three (3) identical recent passport photographs (Size: 2 in. x 1-1/2 in).

3. Proof of Saint Lucia Nationality. The following documents may be submitted as proof of Saint Lucia nationality: Expired Saint Lucian Passport, a Saint Lucia Driver's Licence or a Saint Lucia Identification Card). Please note that a Saint Lucia Birth Certificate alone is not sufficient. This means that the applicant's identification will have to be verified prior to the emergency travel document being issued.

If passport is lost, a **police report** is required. The police report must be faxed directly from police department to the Consulate at 416 203 8486. Please note that if your passport is lost or damaged, a **Statement of Witness form** must also be completed and accompany the Emergency Travel Document Application form.

4. A complete flight Itinerary and proof of the purchase of the flight.

5. A Money order in the amount of **CAD \$30.00** must be made payable to the "**Consulate General of Saint Lucia**". The applicant's name and address must be printed on the money order. **The emergency travel document fee is non-refundable.**

6. The applicant's full address must be filled in and should include the postal code.

7. The applicant's must provide a next of kin on the application for and the person's full address must be filled in and should also include their postal code.

8. The processing time for an Emergency Travel Document is five (5) working days.





**CONSULATE GENERAL OF SAINT LUCIA
APPLICATION FOR EMERGENCY PASSPORT**

PERSONAL INFORMATION

Full Name of Applicant			
Given Name(s)			Surname
Date of Birth	Place of Birth	Gender	Marital Status
DD MM YYYY		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Height	Colour of Hair	Colour of Eyes	Special Peculiarities

PASSPORT INFORMATION

Reason for Applying for an Emergency Passport			
<input type="checkbox"/> Expired <input type="checkbox"/> Lost (If lost, please complete Statement of Witness form) <input type="checkbox"/> Other _____			
Most Recent Passport Number	Date and Place of Issue		Date of Expiration
	DD MM YYYY	Place of Issue	DD MM YYYY

FLIGHT INFORMATION

Date of Travel	Airline and Flight Number	VIA
DD MM YYYY		
Reason for request of Emergency Travel Document		

CONTACT INFORMATION

Full Address in Canada				Contact Number in Canada
Address			City	Province
				Postal Code
Intended Address in Saint Lucia				Contact Number in Saint Lucia
Next of Kin	Relationship	Address		

Signature of Applicant

Signature of Legal Parent or Guardian

Date

Date

FOR OFFICIAL USE ONLY	
Date Processed _____	Prepared by _____
Emergency Document No. _____	Receipt No. _____
Remarks _____	

