

JUSTICE OF THE PEACE APPLICATION FORM FOR THE PARISH OF	Photograph
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LAST NAME	FIRST NAME	MIDDLE NAME
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HOME ADDRESS	NATIONALITY	MARITAL STATUS ___/___/___/___ M S D W	DATE OF BIRTH ___/___/___ YY MM DD
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TELEPHONE NUMBERS Home: _____ Cellular: _____ Work: _____ Email address: _____	OCCUPATION Tax Registration Number (TRN)
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EMPLOYER'S INFORMATION

RECORD OF COMMUNITY INVOLVEMENT(S)

Other Information
Next of Kin: _____ Relation: _____ Address: _____ Telephone numbers: _____

Are any of your family member(s) a Justice of the Peace? <input type="checkbox"/> Yes <input type="checkbox"/> No, If yes state below Name: _____ Contact number: _____ Address: _____
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APPLICANT'S SIGNATURE
_____ <div style="display: flex; justify-content: space-between;"> Signature Date </div>

For Official Use Only
Date received: _____ Date for interview: _____ Date sent to MOJ: _____ _____ Custos of

Please note: other documents to be submitted : - A photocopy of the applicant's Birth Certificate or the first two (2) pages of his/her Jamaican Passport; Police Record; proof of change of name; one (1) passport sized photo and two (2) letters of recommendation one **MUST** be from the community in which you live.