



THE GOVERNMENT OF THE BAHAMAS

Department Of Immigration

Outstanding/Pending Permits

RESIDENT SPOUSE COLLECTION FORM

APPLICANT'S PERSONAL INFORMATION:			
First Name: *			
Middle Name:			
Last Name: *			
Email Address: *			
Phone Contact: *	Home:		Cell:
SPOUSAL INFORMATION:			
First Name: *			
Middle Name:			
Last Name: *			
Email Address: *			
Phone Contact: *	Home:		Cell:
The Below Information Is Found On The Auxiliary Receipt			
APPLICANT'S IDENTIFICATION NUMBER: *			
ENROLLMENT DATE: *			
	(Month/Day/Year)		

SUBMIT

NOTE:

All fields marked with an asterisk* are required.