

CARICOM POINT OF ENTRY /DEPARTURE / INLAND COMPLAINTS FORM

Mail form to the CSME Focal Point (contact information)

A. PERSONAL INFORMATION

Surname -----
First Name -----
Nationality -----
Sex -----
Passport Number -----
Address -----
Telephone -----
E-mail -----

IMMIGRATION ENTRY AND DEPARTURE INFORMATION

Point of Entry / Departure -----
Date of Entry / Departure -----
Arrived from / Going to -----
Arrived on / Departed on -----

B. NATURE OF COMPLAINT

1. Please indicate the government department(s) against which you make the complaint:

Immigration Customs Police Security
 Accreditation Council Registrar of Companies Ministry of? : Other.....

2. Please indicate what your complaint relates to:

Refused Entry Refused Boarding Treatment Refused Recognition
 Other

3. Please indicate the purpose of your visit and basis of your complaint:

General travel
 Free Movement of Skills
 Free Movement of Capital
 The Right of Establishment
 Free Movement of Services

o Other

4. Briefly describe your complaint, focusing on the exact issue and the Ministries/ Departments involved.

5. Briefly describe steps you have taken to address the issue.

Signature ----- Date -----

This foregoing procedure is without prejudice to the CARICOM national's right to pursue legal action under the Revised Treaty of Chaguaramas.