



DEPARTMENT OF  
EDUCATION SERVICES  
CAYMAN ISLANDS GOVERNMENT

DES Official  
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**FOR OFFICIAL USE ONLY**

SCHO: \_\_\_\_\_

YEAR: \_\_\_\_\_

UPN #: \_\_\_\_\_

### Immigration Confirmation of Student Residential Status Form

Section 1 Student's Information										
Last Name:			First Name :			Middle Name:			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth: <b>(dd/mm/yy)</b>			Physical Address & House Number:					District:		
School <b>Currently</b> Enrolled							Grade/Year			
School To Attend							Grade/Year			
Section 2 Primary Parent/Guardian										
Last Name:			First Name:				Relationship to student:			
House Number & Street Address:					District:		PO Box:		Post Code:	
Cellular:		Work Phone:		Ext.	Home Phone:		Email:			
Section 2.1 Secondary Parent/Guardian										
Last Name:			First Name:				Relationship to student:			
House Number & Street Address:					District:		PO Box:		Post Code:	
Cellular:		Work Phone:		Ext.	Home Phone:		Email:			
Section 3 For Immigration Department Use Only										
Residential Status: Please Tick The Appropriate Box										
The above-named student is:										
<input type="checkbox"/> NOT a Legal Resident in the Cayman Islands										
<input type="checkbox"/> A Legal Resident in the Cayman Islands by virtue of the following: <b>(dd/mm/yy)</b>										
<input type="checkbox"/> A dependent of a Caymanian					<input type="checkbox"/> A dependent of a Permanent Residence					
<input type="checkbox"/> A dependent of Residency ERC Holder: <b>Expiry Date</b> _____					<input type="checkbox"/> Student Visa: <b>Expiry Date</b> _____					
<input type="checkbox"/> A dependent of a Government Employee: <b>Expiry Date of Contract</b> _____										
<input type="checkbox"/> A dependent of a Work Permit Holder: <b>Expiry Date of Permit</b> _____										
The above-named student can:										
<input type="checkbox"/> Attend <b>ANY</b> school					<input type="checkbox"/> Attend <b>Government</b> school only					
<input type="checkbox"/> Attend <b>Private</b> school only					<input type="checkbox"/> <b>CAN'T attend</b> any Schools in the Cayman Islands					
Section 3.1 Any Other Relevant Information/Comments										
Section 4 Signature of Chief Immigration Officer								Date		
Print Name				Signature						