

SKNCIR – PROFESSIONAL SERVICES (PS) REGISTRATION FORM



REF#: _____

BASIC INFORMATION

Name (First): _____ (Last): _____ Date (d/m/y): _____

Address: _____ Country of Residence: _____

Gender: (M): _____ (F): _____ Birthdate (d/m/y): _____ Country of Birth: _____

Phone Number(s): Cell #: _____ Work #: _____ Home #: _____

Email Address: _____

PROFESSIONAL SKILL(S) / SERVICE

Professional Services Skill #1: _____ No. of Years Applying Skill: _____

Professional Services Skill #2: _____ No. of Years Applying Skill: _____

Registered Business: (Yes): _____ (No): _____ Year Started: _____

Business Name: _____ Business Address: _____

Website: _____ Facebook: _____

Internet Site(s): YouTube: _____ Twitter: _____

Soundcloud: _____ Other: _____

Reference (List 1 Person Who Can Verify Your Professional Skills/Services – Name, Cell, Email) + Letter of Reference

1 _____

EVIDENCE OF YOUR SKILL(S): Applicants must submit a Portfolio that demonstrates their Skill, Talent, Product (Videos, Photographs, Media Links, etc.)

EDUCATION/ACHIEVEMENT CERTIFICATES: If applicable, Applicants must provide photocopies of Certificates, or Awards received for their Creative Skill, Talent, Product or Service.

PLEASE SEE BACK OF PAGE FOR ADDITIONAL INFORMATION NEEDED 

RETURN FORM TO: St. Kitts Department of Culture, Palms Building, The Circus Basseterre
RDU Tel: 1 (869) 467-1396 | Email: skncir@gov.kn | Website: www.skncir.gov.kn

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CREATIVE INDUSTRY RESUME / BIOGRAPHY

(Short Description Summarizing Your Professional Skill(s)/Services)

*Please ensure that you attach **PROOF OF CITIZENSHIP** when submitting application
(Copy of Passport OR Copy of a National Identification Card along with Birth Certificate)

I _____, hereby declare that the information I provided in this application is accurate and true. I own or have cleared the copyright for all Photographs, Audio Recordings or Video Footage samples submitted in support for my skills and experience. I give St. Kitts Department of Culture Permission to display or upload samples to a digital platform managed by St. Kitts Department of Culture to promote my Skills/Services.

Signature: _____ Date (d/m/y): _____

**All Documents Submitted Are Used By St. Kitts Department Of Culture For Skills Verification and Assessment.
Thank You For Registering To Be A SKNCIR Member!**