2252:6355



U.S. Department of State

STATEMENT OF CONSENT: U.S. PASSPORT ISSUANCE TO A CHILD

OMB Control No. 1405-0129 Expiration Date: 10-31-2027 Estimated Burden: 20 Minutes

Print legibly or type using black ink only. If you make an error, complete a new form. Do not correct. Reset SECTION 1. CHILD APPLYING FOR A U.S. PASSPORT Print your child's name as it appears on the passport application (Form DS-11) and child's birthdate. a.Child's Name (LAST, FIRST MIDDLE) b. Child's Birthdate (MM-DD-YYYY) Example: SMITH, JOHN ROBERT Check box if age 16 or 17 SECTION 2. ADULT APPLYING IN PERSON WITH CHILD UNDER AGE 16 Print name of adult appearing in person to apply for a U.S. passport and relationship to the above-named child. a. Applving Adult's Name // 4ST, FIRST MIDDLE) b. Applying Adult's Relationship to Child (Check one) Legal Guardian ☐ Third Party SECTION 3. STATEMENT OF CONSENT FOR PASSPORT ISSUANCE TO THE CHILD In blank space 1 (and blank space 2, if applicable) below, print the full name(s) of the legal parent/legal guardian(s) who cannot appear in-person with the minor child to apply for the passport. Then complete the address and contact details in the boxes below. I/We, 1) _ and 2) consent to the issuance of a Upfited States passport to the minor child. I/We consent for the adult named in Section 2 to accompany the minor child and to execute the passport application if the minor child is under age 16. This consent is unconditional regarding passport validity and travel. This concert is valid to ssport book and card unless otherwise stated in writing here Example: "Issue' passport book only" or "Issue passport card only" 1) Non-Applying Legal Parent/Guardian Address and Contact Details 2) Non-Applying Legal Parent/Guardian Address and Contact Details Check box if same as 1 Street Address: Street Address: City, State/Country, Zip Code City, State/Country, ZipCode: _____ Phone: _ Phone: Email: Email: SECTION 4. OATH/AFFIRMATION. STOP HERE! Do not sign this form until requested to do so by a Passport Authorizing Officer or Notary. This section must be signed by the affiant(s) named in Section 3 of this form. OATH: I solemnly swear (or affirm) that the above information given by me is true and correct to the best of my knowledge and belief. 1) Non-Applying Legal Parent/Legal Guardian Signature 2) Non-Applying Legal Parent/Legal Guardian Signature Date Date 1) Non-Applying Legal Parent/Guardian Identifying Documents: 2) Non-Applying Legal Parent/Guardian Identifying Documents: ☐ Driver's License ☐ Passport ☐ Military ☐ Other ☐ Driver's License ☐ Passport ☐ Military ☐ Other__ Name: Name: **ID Number** ID Number: Place of Iss Place of Issue: Issue Date: Issue Date: Expire Date: On the date specified above and below, the affiant(s) listed above who is/are not related to me, personally appeared before me and executed this consent for the uses and purposes therein contained. I have properly verified the identity of the affiant(s) by personally viewing the a tification document(s) and matching photocopy/ies). SEAL Passport Authorizing Office Date Location ure (Agency or City, State) Attach a clear photocopy of the front and back of the valid government-issued photo identification presented to the passport authorizing officer or notary. This consent is valid for 90 days from the passport authorizing officer or notary's signed date. If

this consent expires before submitting the U.S. passport application for the above-named child, new consent is required.