Passport Consent Form For Minor

Date: [Date]

I/We, the undersigned, [Parent/Guardian Full Name(s)], am/are the legal parent(s) or guardian(s) of [Minor's Full Name], born on [Date of Birth], in [Place of Birth].

I/We authorize the issuance of a passport for the minor child mentioned above. I/We acknowledge that the information provided is true and correct to the best of my/our knowledge.

Parent/Guardian Information:

Parent/Guardian 1:

Full Name: [Full Name]

• Relationship to Minor: [Relationship]

Address: [Full Address]

Telephone Number: [Phone Number]

Email Address: [Email]

Parent/Guardian 2 (if applicable):

Full Name: [Full Name]

• Relationship to Minor: [Relationship]

Address: [Full Address]

Telephone Number: [Phone Number]

• Email Address: [Email]

Minor's Information:

• Full Name: [Minor's Full Name]

Date of Birth: [DOB]

• Place of Birth: [Place of Birth]

Consent Statement:

I/We hereby declare that the information provided here is accurate and true, and I/We consent to the application for a passport for the minor child named herein. I/We have read and understood the conditions under which the passport will be issued and agree to abide by them.

Signature(s):

[Parent/Guardian 1 Name]

Date: [Date]

[Parent/Guardian 2 Name]

Date: [Date] (if applicable)

Witness (if required):

• Full Name: [Full Name]

Address: [Full Address]

Telephone Number: [Phone Number]

• Date: [Date]

Document Submission:

Please attach copies of required documents as per the passport application guidelines, including proof of the minor's U.S. citizenship, evidence of parental relationship, and photo identification of the signing parent(s)/guardian(s).