

SAMPLE PARENTAL CONSENT



U.S. Department of State
STATEMENT OF CONSENT:
ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16
Attention: Read WARNING and FORM INSTRUCTIONS on Page 1

OMB CONTROL NO. 1405-0129
OMB EXPIRATION DATE: 08-31-2019
ESTIMATED BURDEN: 20 Minutes

1. MINOR'S NAME					
Last	KABORE	First	Issa	Middle	Junior
2. MINOR'S DATE OF BIRTH (mm/dd/yyyy)		3. THIS AUTHORIZATION IS VALID FOR:			
10-05-2017		<input type="checkbox"/> Passport Book and Card	<input checked="" type="checkbox"/> Book Only	<input type="checkbox"/> Card Only	

4. STATEMENT OF CONSENT To be completed by the non-applying parent or guardian using his/her information when not present at the time the applying parent or guardian submits the minor's application. Statements expire after 90 days.

I, Seydou Kabore authorize Alimata Belem
Print Name (non-applying parent/guardian) Print Name (person applying for minor's passport)

to apply for a United States passport for my minor child named on this application. My consent is unconditional in regards to passport validity and travel.

Secteur 15, Rue 15-12 N/A Ouagadougou N/A N/A
Street Address (non-applying parent) Apartment City State Zip Code
(226) 70-25-25-25 SeydKabore@gmail.com
Area Code Telephone Number E-mail Address

STOP! YOU MUST SIGN THIS FORM IN FRONT OF A NOTARY.

OATH: I declare under penalty of perjury that all statements made in this supporting document are true and correct.

Signature of Non-Applying Parent or Guardian

Date (mm/dd/yyyy)

NOTE: A clear photocopy of the front and back of the identification you presented to the notary is required with this form.

5. STATEMENT OF CONSENT NOTARIZATION

TO BE COMPLETED BY THE NOTARY

Name of Notary _____
Print Name (Notary Public)

Location _____
City, State

Commission Expires _____
Date (mm/dd/yyyy)

Identification Presented by Non-Applying Parent or Guardian:
 Driver's License Passport Military ID Other (specify) _____

ID Number: _____ Place of Issue: _____

Issue Date (mm/dd/yyyy): _____ Expiration Date (mm/dd/yyyy): _____

OATH: By signing this document, I certify that I am a licensed notary under laws and regulations of the state or country for which I am performing my notarial duties, that I am not related to the above affiant, that I have personally witnessed him/her sign this document, and that I have properly verified the identity of the affiant by personally viewing the above notated identification document and the matching photocopy.

Signature of Notary _____ Date of Notarization _____
Date (mm/dd/yyyy)