



**U.S. Department of State
STATEMENT OF CONSENT:
ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16**

USE OF THIS FORM

The information collected on this form is used in conjunction with the DS-11, "Application for a U.S. Passport." When a minor under the age of 16 applies for a passport and one of the minor's parents or legal guardians is unavailable at the time the passport is executed, a completed and notarized DS-3053 can be used as the statement of consent. If the required statement is not submitted, the minor may not be eligible to receive a U.S. passport. The required statement may be submitted in other formats provided they meet statutory and regulatory requirements.

FORM INSTRUCTIONS

1. Complete fields 1, 2, and 3. If field 3 is not completed, authorization will be valid for both products.
2. Complete field 4, Statement of Consent, only if you are a non-applying parent or guardian consenting to the issuance of a passport for your minor child. NOTE: Your signature must be witnessed and notarized in field 5.
3. The written consent from the non-applying parent that accompanies an application for a new U.S. passport must not be more than 90 days old. A clear photocopy of the front and back of the non-applying parent's government-issued photo identification presented to the notary is required with the written consent.
4. Please submit this form with your minor child's new DS-11 passport application to any designated acceptance facility, U.S. Passport Agency, U.S. Embassy, or U.S. Consulate abroad.

SPECIAL REQUIREMENTS FOR INSTITUTIONS/ENTITIES GRANTED GUARDIANSHIP

Below is a list of documents **you must** submit with your DS-3053:

1. A **certified** order of a court of competent jurisdiction granting guardianship to the institution/entity.
2. A signed statement from the institution/entity **on letterhead** authorizing a specific person to apply for a passport for the child on its behalf. The statement must include the minor's name and the name of the individual(s) authorized to apply for the passport.
3. A photocopy of employee identification documents proving the person applying for the minor's passport works at the institution/entity.

Please ensure that all of the above **do NOT have any conditions** placed on the period of validity of the passport or where the minor may travel. If there are conditions in the statement, a new statement of unequivocal consent is required.

WARNING: False statements made knowingly and willfully on passport applications, including affidavits or other supporting documents submitted therewith, may be punishable by fine and/or imprisonment under U.S. law, including the provisions of 18 U.S.C. 1001, 18 U.S.C. 1542, and/or 18 U.S.C. 1621.

FOR INFORMATION AND QUESTIONS

For passport and travel information, please visit our website at travel.state.gov. In addition, contact the National Passport Information Center (NPIC) toll-free at 1-877-487-2778 (TDD 1-888-874-7793) or by e-mail at NPIC@state.gov. Customer Service Representatives are available Monday-Friday, 8:00 a.m. - 10:00 p.m. Eastern Standard Time (excluding federal holidays). Automated information is available 24/7.

For information on International Parental Child Abduction, please visit www.travel.state.gov/childabduction or contact the Office of Children's Issues by telephone at 1-888-407-4747 or by e-mail at PreventAbduction@state.gov.

PRIVACY ACT STATEMENT

AUTHORITIES: We are authorized to collect this information by 22 U.S.C. 211a et seq.; 8 U.S.C. 1104; 26 U.S.C. 6039E; Executive Order 11295 (August 5, 1966); and 22 C.F.R. parts 50 and 51.

PURPOSE: The primary purpose for soliciting the information is to establish two parent consent for a minor's passport application, as required by Public Law 106-113, Section 236.

ROUTINE USES: This information may be disclosed to another domestic government agency, a private contractor, a foreign government agency, or to a private person or private employer in accordance with certain approved routine uses. These routine uses include, but are not limited to, law enforcement activities, employment verification, fraud prevention, border security, counterterrorism, litigation activities, and activities that meet the Secretary of State's responsibility to protect U.S. citizens and non-citizen nationals abroad. More information on the Routine Uses for the system can be found in System of Records Notices State-05, Overseas Citizen Services Records and State-26, Passport Records.

DISCLOSURE: Failure to provide the information requested on this form may result in the refusal or denial of a U.S. passport application.

PAPERWORK REDUCTION ACT STATEMENT

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time required for searching existing data sources, gathering the necessary data, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, Bureau of Consular Affairs, Passport Services, Office of Legal Affairs and Law Enforcement Liaison, Attn: Forms Officer 44132 Mercure Cir, P.O. Box 1227, Sterling, Virginia 20166-1227.



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OMB CONTROL NO. 1405-0129
OMB EXPIRATION DATE: XXXXX
ESTIMATED BURDEN: 20 Minutes

Attention: Read WARNING and FORM INSTRUCTIONS on Page 1

1. MINOR'S NAME

Last	First	Middle
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2. MINOR'S DATE OF BIRTH (mm/dd/yyyy) 3. THIS AUTHORIZATION IS VALID FOR:

Passport Book and Card Book Only 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, _____ authorize _____
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.

Street Address (non-applying parent) Apartment City State Zip Code

(_____) _____
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

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): _____

**NOTARY
SEAL**

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)