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Complete and Return – Use Additional Sheets if Necessary

Name of Applicant: _____ DOB: _____
Signature _____ Date _____

I. **Relatives:** List the name, complete address, telephone number (with area code) and date and place of birth of your father, mother, all brothers and sisters and your spouse (if married).

RELATIVE	NAME	ADDRESS	(AREA CODE) TEL#	DATE OF BIRTH	PLACE OF BIRTH
Father/Stepfather					
Mother/Stepmother					
Spouse					
Former Spouse					
Brother/Stepbrother					
Brother/Stepbrother					
Sister/Stepsister					
Sister/Stepsister					

ADD'L
→

→ Children's names and dates and places of birth: _____

II. **References:** List the name, complete address and telephone number (with area code) of two references who have known you at least five years.

RELATIONSHIP	NAME	ADDRESS	AREA CODE-TEL #	YEARS KNOWN

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III. **Education:** List the name, address and attendance dates of all schools you have attended both in the USA and abroad. Please begin with your most recent school attended.

NAME OF SCHOOL	ADDRESS (STREET, CITY, STATE, COUNTRY)	YEARS ATTENDED (ex.- 1967-1968)

IV. **Residences (in U.S. and Abroad):** List the complete address for all your residences during the last 20 years.

CURRENT ADDRESS:				
NO. AND STREET	CITY	STATE	COUNTRY	FROM ____ TO ____
PREVIOUS DURING LAST 10 YEARS:				
NO. AND STREET	CITY	STATE	COUNTRY	FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____
				FROM ____ TO ____



V. Employment: List the name, address, telephone number (with area code, and supervisor's name for all your employers during the last 20years).

NAME OF EMPLOYER/BUSINESS	SUPERVISOR	ADDRESS	AREA CODE & TEL#	FROM _____ TO _____
				FROM _____ TO _____
				FROM _____ TO _____
				FROM _____ TO _____
				FROM _____ TO _____
				FROM _____ TO _____
				FROM _____ TO _____
				FROM _____ TO _____

VI. For all applicants NOT born in the United States, please list when and where you first arrived in the United States.

WHEN: _____ WHERE: _____

VII. Name of person completing this form IF NOT THE APPLICANT: _____

Date of Birth _____

U.S. Passport Number _____ Alien Registration No. _____

Address _____ Telephone No _____

VIII. Signature: _____ Date: _____

IX. DOCUMENTS TO BE SUBMITTED WITH THIS COMPLETED FORM:

1. HIGH SCHOOL /JR HIGH SCHOOL YEARBOOK (IF CLAIMING BIRTH IN THE U.S.)
2. _____ FOREIGN PASSPORT
3. _____ U.S. MILITARY (BOOT CAMP) YEARBOOK/ID
4. _____ EXPIRED U.S. PASSPORT
5. _____ SCHOOL ID
6. _____ COMPANY/STATE GOV'T ISSUED PHOTOGRAPHIC ID WITH ISSUE DATE



7. _____ PUBLISHED DOCUMENT WITH CAPTIONED
PHOTO AND DATE

8. _____ SCHOOL CERTIFIED SCHOOL RECORDS WITH
PHOTOGRAPHS, ETC.

9. _____ OTHER HISTORICAL PHOTOGRAPHIC EVIDENCE

10. AFFIDAVIT(S) FROM BLOOD RELATIVES SUCH AS
MOTHER, FATHER, SISTER, BROTHER (**NOTE: IF YOU HAVE AN
APPOINTMENT TO COME INTO OUR AGENCY FOR AN
INTERVIEW, RELATIVES WILL NORMALLY COMPLETE
AFFIDAVITS ON FORMS DS-71**)

OTHER DOCUMENTS WHICH MAY BE CONSIDERED:

1. **BABY BOOK**
2. **PRE-NATAL RECORDS**

To Customer: If you have any questions regarding this letter or your passport application, contact the National Passport Information Center (NPIC) toll-free at 1-877-487-2778 (TDD/TDD: 1-888-874-7793). Customer Service Representatives are available from 8:00 a.m. to 8:00 p.m., ET, Monday through Friday, excluding Federal holidays. These hours may be expanded to accommodate increased calls during periods of heavy travel. Also, for a wealth of passport and travel information, including where to apply, visit us on line at travel.state.gov.

Personal Documents List

The following is a list of documents which have proved helpful with other passport applications. You may send any personal documents which are not listed for consideration. **Older documents are most helpful.** Any type of document which is expired, such as an identification card or driver's license, is useful. Documents that bear your photograph, signature and/or physical description are particularly helpful.

1. Hospital birth certificate and/or record: Contact hospital
2. Baptismal certificate/Confirmation certificate: Contact church
3. Physician's or immunization records created before age 5: Contact physician
4. Grammar school transcript and/or diploma: Contact county school superintendent
5. High school transcript and/or diploma: Contact county school superintendent
6. College diploma and or/transcript
7. Technical/trade school diploma and/or transcript
8. Copy of high school or college yearbook photo page with name and name of school
9. Driver's license(s) (valid or expired) / suspension notice
10. Military discharge (DD 214)
11. Selective Service Registration Card and/or Classification Card
12. Military identification card
13. Union membership card
14. Government identification card (federal, state, municipal)
15. Professional identification card
16. Professional license (pilot, nurse, beautician, x-ray technician)
17. Student identification card (school or college)
18. Expired passport
19. Voter registration card
20. Vehicle registration and/or title
21. Tax records and/or W-2 forms
22. Pay stubs
23. Medicare card and/or medicaid card
24. Welfare card and/or food coupon identification card
25. Marriage license and/or certificate
26. Divorce decree
27. Insurance papers
28. Apartment lease
29. Mortgage
30. Real property tax assessments
31. Utility bills
32. Bank statements
33. Your child's birth certificate showing you as mother/father
34. Newspaper articles