



**DECLARATION OF CONSENT OF THE PARENT/LEGAL GUARDIAN**

I hereby declare that I authorize \_\_\_\_\_ to apply for a family  
reunion visa application for my child \_\_\_\_\_.

**1. Details of my child**

|     |                            |                               |                                 |                                |
|-----|----------------------------|-------------------------------|---------------------------------|--------------------------------|
| 1.1 | Name (Surname, First Name) |                               |                                 |                                |
| 1.2 | Date of Birth              |                               |                                 |                                |
| 1.3 | Sex                        | <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Other |
| 1.4 | Passport Number            |                               |                                 |                                |

**2. Details of the person in India who will apply for visa for my child**

|     |                            |  |  |  |
|-----|----------------------------|--|--|--|
| 2.1 | Name (Surname, First Name) |  |  |  |
| 2.2 | Date of Birth              |  |  |  |
| 2.3 | Passport Number            |  |  |  |
| 2.4 | Nationality                |  |  |  |
| 2.5 | Relationship to the Child  |  |  |  |

**3. Signature of the parent/legal guardian living in Germany.**

|     |                            |  |  |  |
|-----|----------------------------|--|--|--|
| 3.1 | Name (Surname, First Name) |  |  |  |
| 3.2 | Place and date             |  |  |  |
| 3.3 | Signature                  |  |  |  |