

U.S. Department of State

APPLICATION FOR A U.S. PASSPORT

OMB Control No. 1405-0004 Expiration Date: 04/30/2025 Estimated Burden: 85 Minutes

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	Sel	lect docu	ıment(s) for w	hich y	ou are	subm	itting	fees	:								
	☐ U.S. Passport Book ☐ U.S. Passport Card ☐ Both																	
	The U.S. passport card is <u>not</u> valid for international air travel. See Instruction Page 3																	
		☐ Regular Book (Standard) ☐ Large Book (Non-Standard) The large book is for frequent international travelers who need more visa paes.																
	The la	irge book is	for frequ	ent inter	national	travelers	s who ne	ed mo	ore visa	ра е	S.							
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	2. Date of Birt	th (mm/da	l/yyyy)	3. G	ender (I	ReadInstr	uction Pa	ge1) 4	. Place	of Bir	th (City &	State if in	the U.	S. or City	& Country	as it is pi	resently kn	own.)
				M	F X	Changing g		ker?										
						Yes												
	5. Social Sec	urity Num	ber		6. En	nail (Se	e applica	ition sta	atus at	passp	ortstatus.s	state.gov) 7. I	Primary	y Contac	t Phone	Numbe	r
8 Mailin	g Address Line	1. Street/R	FD# P) Boy	or LIRR													
o. Walin	ig Address Line	i. Ollectiff	U^{H} , V	J. DOX,	OI OIND													
Address	Line 2: (Include A	Apartment,	Suite, et	tc. If app	olicant is	s a child	', write '	'In Car	re Of" d	of the	parent. E	xample	: In Ca	are Of -	Jane Do	e)		
City							State	7	ip Cod	de de		(Count	ry (if o	utside the	e I Inited	l States)	
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9. List a	II other names y	ou have u	sed. (Ex	amples.	: Birth N	Name, M	laiden,	Previo	us Ma	rriage	, Legal N	lame Cl	nange.	Attach	h additior	al page	es if need	ded.)
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2"	3/8	1	N)	Name														
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2	_/ <u>/</u> _#;	//	\[\] \[\(\(\lambda \) \]	n/dd/yyyy) 						(m	m/dd/yyyy)						Issuance	
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	(Seal))		(unl	ess exp	lanatory s	statemer	it is atta	ached):	2) the	statemen or includ	ts made	on the	applicati	ion are tru	e and co	rrect: 3) I	have not
		/		pho	tograph	attached	to this	applicat	tion is a	a genu	ine, curre	nt photog						
				war	ning on	page 4 of	r the inst	ructions	s to the	applic	ation form							
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Cian	nature of person authori	izad ta assant	opplication		_	Da	te				Арр	licant's	Legal S	Signatur	re - age 16	and old	ler	
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By sign oath and	ning this form, I certify th I witnessed the applica	hat I have prov nt's/legal guar	≀ided the ve 'dian's signa	erbal ature.					x									
		-	-			Agent ID	Number			Mothe	er/Father/	Parent/L	egal G	uardian	's Signati	ıre (if ide	entifying m	inor)
	Drint English New	ne/Location																
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Name of Applicant (Last, First, & Middle)	Date of Birth (mm/dd/yyyy)										
	/ /										
10. Parental Information Mother/Father/Parent - First & Middle Name (at Parent's Birth) Last Name (at Parent's Birth)											
,											
Date of Birth (mm/dd/yyyy) Place of Birth (City & State if in the U.S. or City & Country as it is presently kn	nown) Gender U.S. Citizen?										
	☐ M ☐ Yes										
Mother/Father/Parent - First & Middle Name (<u>at Parent's Birth)</u>											
Date of Birth (mm/dd/yyyy) Place of Birth (City & State if in the U.S. or City & Country as it is presently kn	nown) Gender U.S. Citizen?										
	☐ M ☐ Yes ☐ No										
11. Have you ever been married?											
Full Name of Current Spouse or Most Recent Spouse (Last, First & Middle) Date of Birth (mm/dd/yyyy) Place of Birth											
U.S. Citizen? Date of Marriage Have you ever been widowed or divorced? Widow/ □ Yes □ No (mm/dd/yyyy) □ Yes □ No (mm/dd/yyyy)	Divorce Date n/dd/yyyy)										
	Employer or School (if applicable)										
□ Home □ Cell	amproyor or concer (ii appricable)										
□ Work □ 18. Travel Plans (If no travel plans, please write "none")											
15. Height 16. Hair Color 17. Eye Color Departure Date (mm/dd/yyyy) Return Date (mm/dd/yyyy) Countries	s to be Visited										
19. Permanent Address (Complete if P.O. Box is listed under Mailing Address or if residence is different from Mailing Address. Do											
Street/RFD # or URB	Apartment/Unit										
City.	7:- 0- 1-										
City	State Zip Code										
20. Your Emergency Contact (Provide the information of a person not traveling with you to be contacted in the event Name Address: Street/RFD # or P.O. Box	t of an emergency.) Apartment/Unit										
City State Zip Code Phone Number	Relationship										
21. Have you ever applied for or been issued a U.S. Passport Book or Passport Card? Yes No If ye	es, complete the remaining items in #21.										
Name as printed on your most recent <u>passport book</u> Most recent passport <u>book</u> number Most recent passport <u>book</u> issue date (mm/dd/yyyy)											
Status of your most recent passport book: Submitting with application Stolen Lost In my possession	n (if expired)										
Name as printed on your most recent <u>passport card</u> Most recent passport <u>card</u> number Most recent passport <u>card</u> issue date (mm/dd/yyyy)											
Status of your most recent passport <u>card</u> : Submitting with application Stolen Lost In my possession	n (if expired)										
PLEASE DO NOT WRITE BELOW THIS LINE - FOR ISSUIN	G OFFICE ONLY										
Name as it appears on citizenship evidence											
☐ Birth Certificate SR CR City Filed: Issued: ☐ Sole											
Nat. / Citz. Cert. USCIS USDC Date/Place Acquired: A#											
Report of Birth Filed/Place:											
Passport C/R S/R See #21 #/DOI:											
Other:											
Attached:											
P/C of Citz P/C of ID DS-71 DS-3053 DS-64 DS-5520 DS-5525 PAW NPIC IRL Citz W/S	DS 11 C 03 2022 2										

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