

Passport Consent Form Witness

Minor's Details:

- **Full Name:** Emily Jane Smith
- **Date of Birth:** 01/03/2012
- **Place of Birth:** Boston, MA, USA
- **Passport Number:** [If previously issued]

Parent/Guardian Details:

1. Parent/Guardian 1:

- **Full Name:** Sarah Lynn Smith
- **Relationship to Minor:** Mother
- **Contact Information:**
 - **Phone Number:** 617-555-0101
 - **Email Address:** sarah.smith@email.com

2. Parent/Guardian 2:

- **Full Name:** David John Smith
- **Relationship to Minor:** Father
- **Contact Information:**
 - **Phone Number:** 617-555-0102
 - **Email Address:** david.smith@email.com

Consent Declaration: We, the undersigned, are the legal guardians of the above-named minor, Emily Jane Smith, and do hereby give our consent for her to apply for and obtain a passport. We affirm that the information provided here is correct and that any documents submitted alongside this consent form are authentic.

Witness Details:

- **Full Name:** Michael Aaron Brown
- **Address:** 123 Oak Lane, Boston, MA, USA

- **Contact Information:**
 - **Phone Number:** 617-555-0200
 - **Email Address:** michael.brown@email.com
- **Relationship to Minor/Guardians:** Family Friend

Signatures:

- **Parent/Guardian 1 Signature:** Sarah Lynn Smith
 - **Date:** 10/04/2024
- **Parent/Guardian 2 Signature:** David John Smith
 - **Date:** 10/04/2024
- **Witness Signature:** Michael Aaron Brown
 - **Date:** 10/04/2024

Official Use Only:

- **Received By:** Jane Doe, Passport Officer
- **Date:** 10/05/2024
- **Office Location:** Boston Passport Agency

Comments: [No additional remarks]