



CONSULAR AND PASSPORT OFFICES OF THE UNITED STATES OF AMERICA

AFFIDAVIT OF PHYSICAL PRESENCE OR RESIDENCE, PARENTAGE AND SUPPORT

PART I

(All applicants please complete Part I)

Name of U.S. Citizen Parent

I, _____ do solemnly swear (or affirm):
Name

That I am a U.S. citizen/U.S. non-citizen national by: *(choose one)* **Only choose one**

1) birth in _____ on _____
City/Town, State in the United States Date (mm-dd-yyyy)

2) naturalization on _____ before the _____
Date (mm-dd-yyyy) Name of Court and State

3) birth abroad on _____ to U.S. citizen(s) or U.S. non-citizen national(s) in _____
Date (mm-dd-yyyy) Country

That I am *(choose all that apply)* Married Previously Married Single **Select all that applied**

married on _____ to _____
Date (mm-dd-yyyy) Name **If married, enter marriage information; list prior marriages separately**

in _____ If terminated, list date and manner of termination *(e.g. death or divorce)* or enter N/A.
Country

(Please use a separate sheet to list additional marriages and marriage termination information.)

List all biological children of the U.S. citizen parent, even if they were born in the U.S. or to a different parent.

That I am the biological parent of:

| Name of Child | Date of Birth (mm-dd-yyyy) | Place of Birth |
|---------------|-------------------------------|----------------|
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| | | |

(Continue on a separate sheet, if necessary)

That I have been physically present or have had a residence in the United States as follows:

Indicate precise periods of time in the United States

Place (City, State) Date (mm-dd-yyyy) Date (mm-dd-yyyy) Purpose (Indicate purpose of stay: vacation, residence, business, studies, etc.)

| Place (City, State) | Date (mm-dd-yyyy) | Date (mm-dd-yyyy) | Purpose (Indicate purpose of stay: vacation, residence, business, studies, etc.) |
|---------------------|-------------------|-------------------|--|
| | From | To | |

Include precise periods of time outside the U.S. Use passport stamps, itinerary to help. If you do not know the exact day, estimate the day. Month and Year need to be accurate. Use additional pages if all of your periods of presence do not fit on this page.

That I have been physically present or resident abroad as follows: Purpose: (Indicate purpose of stay: vacation, residence, business, studies, U.S. government employment, U.S. government/military service or dependent, etc. If working abroad give name of employer)

Place (Country) Date (mm-dd-yyyy) Date (mm-dd-yyyy)

| Place (Country) | Date (mm-dd-yyyy) | Date (mm-dd-yyyy) | Purpose: (Indicate purpose of stay: vacation, residence, business, studies, U.S. government employment, U.S. government/military service or dependent, etc. If working abroad give name of employer) |
|-----------------|-------------------|-------------------|--|
| | From | To | |

(Continue on a separate sheet, if necessary)

That the other biological parent of the above-named child/children for whom this application for a Consular Report of Birth and/or U.S. passport is being filed is:

_____ Name

is a citizen or national of the U.S.

is not a citizen of the U.S.

Include other biological parent's name here. For surrogacy cases with anonymous genetic material donor, leave this space blank.

If the other parent is a U.S. citizen/U.S. non-citizen national it is by:

Only complete this space if other parent is a U.S. citizen or national

1) birth in _____ on _____
City/Town, State in the United States Date (mm-dd-yyyy)

2) naturalization on _____ before the _____
Date (mm-dd-yyyy) Name of Court and State

3) birth abroad on _____ to U.S. citizen(s)/U.S. non-citizen national(s) in _____
Date (mm-dd-yyyy) Country

The other biological parent has been physically present or has had a residence in the United States as follows: (INFORMATION ABOUT THE UNMARRIED NON-APPLYING PARENT SHOULD ONLY BE PROVIDED IF THAT PARENT IS A U.S. CITIZEN OR U.S. NON-CITIZEN NATIONAL)

Only complete this space if the other biological parent is a U.S. citizen or U.S. national and has spent time in the United States.

| Place (City, State) | Date (mm-dd-yyyy) | Date (mm-dd-yyyy) | (Indicate purpose of stay: vacation, residence, business, studies, etc.) |
|---------------------|----------------------|----------------------|--|
| | From | To | |

(Continue on a separate sheet, if necessary)

PART II

(All applicants with a child/children born out of wedlock)

PLEASE STOP HERE! Part II of this document must be signed before a Consular Officer, Passport Specialist, or designated Consular/Acceptance Agent at the time the oath is sworn.

My child was born out of wedlock, and I am the biological father through whom such child is claiming U.S. citizenship. I agree to provide financial support for such child until he/she reaches the age of eighteen years.

Signature of Affiant

Subscribed and sworn before me this _____ day of _____, _____.

[SEAL]

Signature and Title of Consular Officer, Passport Specialist or designated Consular/Acceptance Agent Administering Oath

This section is only required if the biological parents were not married at the time the child was born. This section must be completed in front of a U.S. Consular Officer at the U.S. Embassy or U.S. Consulate or at any passport acceptance agency or facility.

PART III

(Oath: To be completed by all applicants)

PLEASE STOP HERE. Part III of the document must be signed before a Consular Officer, Passport Specialist, or designated Consular/Acceptance Agent at the time the oath is sworn.

WARNING: False statements made knowingly and willfully in applications for citizenship documentation or affidavits and other supporting documents are punishable by fine and/or imprisonment under the provisions of 18 USC 1001 and other applicable criminal statutes.

A U.S. Consular Officer or Passport Specialist may require additional evidence of one's blood relationship to one's child and/or evidence of one's physical presence or residence in the United States.

I solemnly swear (or affirm) that all the statements contained in this affidavit are true and complete to the best of my knowledge and belief, and that this affidavit is for the purpose of establishing my relationship to the aforementioned child/children and his/her/their claim to U.S. citizenship.

Signature of affiant

Present Street Address

City

State

Country

Zip Code

Telephone Number

SUBSCRIBED AND SWORN TO (AFFIRMED) before me this _____ day of _____, _____,

at _____,

[SEAL]

Signature and Title of Administering Officer

This section is required for all applicants. This space may be signed in front of a U.S. Consular Officer at the U.S. Embassy or Consulate or at any passport acceptance agency or facility.

PRIVACY ACT STATEMENT

AUTHORITY: The State Department is authorized to collect this information pursuant to 8 U.S.C. § 1104(a)(1), 1104(a)(3), 1401, 1408, 1409, 22 U.S.C. § 211(a) and 213.

PURPOSE: The principal purpose of the information gathered is to determine if a U.S. citizen/national parent(s) has met the statutory physical presence or residence requirements to transmit U.S. citizenship to his/her child born abroad or in the United States for U.S. non-citizen nationality; to establish parentage of the child; and to fulfill the requirements of 8 U.S.C. 1409(a), which permits acknowledgment of paternity under oath and requires the U.S. citizen father's written agreement to provide financial support for his children born abroad out of wedlock.

ROUTINE USES: The information solicited on this form may be made available to Federal government entities such as the Social Security Administration, the Department of Homeland Security, and Department of Justice, in connection with determinations of citizenship status, administration of federal benefits, and law enforcement purposes as set forth in the System of Records Notice for Overseas Citizens Records, STATE-05, 73 FR 24342 (2008) and the Department wide Prefatory Statement of Routine Uses, 73 FR 40649-40651 (2008). Information also can be made available to appropriate federal, state, local or foreign government entities, such as state law enforcement agencies, state prosecutors, judicial staff, local police, and INTERPOL, in connection with law enforcement, safety, welfare and related matters, as set forth by the System of Records Notice for Overseas Citizens Records, STATE-05, 73 FR 24342 (2008). These matters include custody disputes and notification of next of kin.

Furnishing the information on this form is voluntary; however, failure to furnish the requested information may delay or prevent you from documenting your child as a U.S. citizen or national.

PAPERWORK REDUCTION ACT (PRA) STATEMENT

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, 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: CA/OCS/PMO, 10th Floor, SA-17, U.S. Department of State, Washington, DC 20036.