



GUARDIAN'S CERTIFICATE

VÅRDNADSHAVARINTYG

I/we, the undersigned, give permission for my/our child who is not yet 18 years of age to have his/her own passport.

Written consent of both parents is required, unless legal custody has been granted to one parent or to another person.

Child's name

Personal ID number

Address

LEGAL GUARDIAN

LEGAL GUARDIAN

Name (please print)

Name (please print)

Date of birth

Date of birth

Street address

Street address

City, state and zip code

City, state and zip code

Daytime telephone number

Daytime telephone number

Signature

Date

Signature

Date

WITNESS

I confirm the above signature.

WITNESS

I confirm the above signature.

Signature

Signature

Name

Name

Address

Address

Telephone number

Telephone number