APPLICATION FOR A U.S. PASSPORT

Please Print Legibly Using Black Ink Only

OMB CONTROL NO. 1405-0004
OMB EXPIRATION DATE: 01-31-2017
ESTIMATED BURDEN: 95 MIN

Attention: Read WARNING on page 1 of instructions

Please select the document(s) for which you are applying:

☒ U.S. Passport Book ☐ U.S. Passport Card ☐ Both

The U.S. passport card is **not** valid for international air travel. For more information see page 1 of instructions.

☒ 28 Page Book (Standard) ☐ 52 Page Book (Non-Standard)

Note: The 52 page option is for those who frequently travel abroad during the passport validity period, and is recommended for applicants who have previously required the addition of visa pages.

☐ D ☐ O ☐ Dep DOTS _____

End. # _____ Exp. _____

1. Name Last: HERNANDEZ GUTIERREZ

First: SARA Middle: JESSICA

2. Date of Birth *(mm/dd/yyyy)*: 10 23 2013

3. Sex M ☐ F ☒

4. Place of Birth *(City & State if in the U.S., or City & Country as it is presently known.)*: CELAYA, MEXICO

5. Social Security Number: 000 00 0000

6. Email Address *(e.g., my_email@domain.com)*: WHOSEYOURMOMMY@YAHOO.COM

7. Primary Contact Phone Number: 587 258 9633

8. Mailing Address: Line 1: Street/RFD#, P.O. Box, or URB.: CALLE DE LA MERCED #432

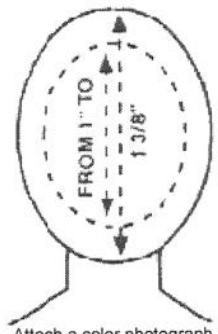
Address Line 2: **Clearly label** Apartment, Company, Suite, Unit, Building, Floor, In Care Of or Attention if applicable. *(e.g., In Care Of - Jane Doe, Apt # 100)*: ISABEL GUTIERREZ

City: CELAYA **State** **Zip Code**: 54320 **Country**, if outside the United States: MEXICO

9. List all other names you have used. *(Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed)*

A. NA B.

STAPLE 2" x 2" STAPLE



Attach a color photograph taken within the last six months

STAPLE 2" x 2" STAPLE

STOP! CONTINUE TO PAGE 2

DO NOT SIGN APPLICATION UNTIL REQUESTED TO DO SO BY AUTHORIZED AGENT

Identifying Documents - Applicant or Mother/Father/Parent on Second Signature Line (if identifying minor)

☐ Driver's License ☐ State Issued ID Card ☐ Passport ☐ Military ☐ Other _____

Name _____

Issue Date *(mm/dd/yyyy)* Exp. Date *(mm/dd/yyyy)* State of Issuance

ID No Country of Issuance

Identifying Documents - Applicant or Mother/Father/Parent on Third Signature Line (if identifying minor)

☐ Driver's License ☐ State Issued ID Card ☐ Passport ☐ Military ☐ Other _____

Name _____

Issue Date *(mm/dd/yyyy)* Exp. Date *(mm/dd/yyyy)* State of Issuance

ID No Country of Issuance

☐ Acceptance Agent ☐ (Vice) Consul USA

☐ Passport Staff Agent

(Seal)

I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not, since acquiring U.S. citizenship or nationality, performed any of the acts listed under "Acts or Conditions" on page four of the instructions of this application (unless explanatory statement is attached); 2) the statements made on the application are true and correct; 3) I have not knowingly and willfully made false statements or included false documents in support of this application; 4) the photograph attached to this application is a genuine, current photograph of me; and 5) I have read and understood the warning on page one of the instructions to the application form.

Name of courier company *(if applicable)* Facility ID Number

Facility Name/Location Agent ID Number

Signature of person authorized to accept applications Date

x _____ **Applicant's Legal Signature - age 16 and older**

x _____ **Mother/Father/Parent/Legal Guardian's Signature** (if identifying minor)

x _____ **Mother/Father/Parent/Legal Guardian's Signature** (if identifying minor)

For Issuing Office Only → Bk _____ Card _____ EF _____ Postage _____ Execution _____ Other _____

* DS 11 B 09 2013 1 *

Name of Applicant *(Last, First, & Middle)*: HERNANDEZ GUTIERREZ, SARA JESSICA

Date of Birth *(mm/dd/yyyy)*: 10/23/2013

10. Parental Information

Mother/Father/Parent - First & Middle Name: JUAN IGNACIO

Last Name *(at Parent's Birth)*: HERNANDEZ PEREZ

Date of Birth *(mm/dd/yyyy)*: 05261982

Place of Birth: LOS ANGELES CA

Sex: X Male, Female

U.S. Citizen?: X Yes, No

Mother/Father/Parent - First & Middle Name: ISABEL RITA

Last Name *(at Parent's Birth)*: GUTIERREZ ESCOBAR

Date of Birth *(mm/dd/yyyy)*: 11151981

Place of Birth: CELAYA GTO MX

Sex: Male, X Female

U.S. Citizen?: Yes, X No

11. Have you ever been married? Yes X No *If yes, complete the remaining items in #11.*

Full Name of Current Spouse or Most Recent Spouse

Date of Birth (mm/dd/yyyy)

Place of Birth

U.S. Citizen? Yes No

Date of Marriage *(mm/dd/yyyy)*

Have you ever been widowed or divorced? Yes No

Widow/Divorce Date *(mm/dd/yyyy)*

12. Additional Contact Phone Number Home Cell Work

13. Occupation *(if age 16 or older)*: INFANT

14. Employer or School *(if applicable)*: N/A

15. Height: 1ft. 0in.

16. Hair Color: BROWN

17. Eye Color: BLUE

18. Travel Plans

Departure Date *(mm/dd/yyyy)*

Return Date *(mm/dd/yyyy)*

Countries to be Visited

19. Permanent Address - *If P.O. Box is listed under Mailing Address **or** if residence is different from Mailing Address.*

Street/RFD # or URB (***No P.O. Box***)

Apartment/Unit

City

State

Zip Code

20. Emergency Contact - *Provide the information of a person not traveling with you to be contacted in the event of an emergency.*

Name: JUAN HERNANDEZ PEREZ

Address: Street/RFD # or P.O. Box: 22 MAIN STREET

Apartment/Unit

City: LOS ANGELES

State: CA

Zip Code: 90210

Phone Number: 555-258-2369

Relationship: FATHER

21. Have you ever applied for or been issued a U.S. Passport Book or Passport Card? Yes X No *If yes, complete the remaining items in #21.*

Name as printed on your most recent passport book

Most recent passport book number

Most recent passport book issue date *(mm/dd/yyyy)*

Status of your most recent passport book: Submitting with application Stolen Lost In my possession *(if expired)*

Name as printed on your most recent passport card

Most recent passport card number

Most recent passport card issue date *(mm/dd/yyyy)*

Status of your most recent passport card: Submitting with application Stolen Lost In my possession *(if expired)*

PLEASE DO NOT WRITE BELOW THIS LINE - FOR ISSUING OFFICE ONLY

Name as it appears on citizenship evidence _____

☐ Birth Certificate SR CR City Filed: Issued:

☐ Nat. / Citz. Cert. USCIS USDC Date/Place Acquired: A#

☐ Report of Birth Filed/Place:

☐ Passport C/R S/R Per PIERS #/DOI:

☐ Other:

☐ Attached:

☐ P/C of ID ☐ DS-3053 ☐ DS-64 ☐ DS-5520 ☐ DS-5513 ☐ Citz W/S

☐ P/C of Citz ☐ DS-10 ☐ DS-86 ☐ DS-71 ☐ IRL ☐ CIS Ver

* DS 11 B 09 2013 2 *