



APPLICATION FOR CONSULAR REPORT OF BIRTH ABROAD OF A CITIZEN OF THE UNITED STATES OF AMERICA

Registration Number

A. THIS SECTION TO BE COMPLETED BY THE CHILD'S PARENT(S) OR GUARDIAN(S) OR THE CHILD (USE SECTION D CONTINUATION SHEET)

INFORMATION ABOUT THE CHILD

1. Name of Child in Full

Sarah
Rose
Smith
(Last/Surname) (First) (Middle)

2. Sex 3. Date of Birth 4. Place of Birth

M F
 05 / 18 / 2015
 San Ignacio
 Belize
(month) (day) (year) (City) (Country)

NOTE: (If the U.S. citizen parent transmitting citizenship to the child is not present, he or she may complete State Department Form DS 5507 Affidavit of Parentage Physical Presence and Support and submit it separately. The parent completing this application should provide as much information on the parent completing the Form DS 5507 as he or she has.)

INFORMATION ON MOTHER/FATHER/PARENT

INFORMATION ON MOTHER/FATHER/PARENT

5. Full Name

Smith
Jane
Isabel
(Last/Surname) (First) (Middle)

6. All Previous Legal Names Used

Vasquez
Jane
Isabel
(Last/Surname) (First) (Middle)

N/A
N/A
N/A
(Last/Surname) (First) (Middle)

7. Sex 8. Date of Birth

M F
 04 / 21 / 1982
(month) (day) (year)

9. Place of Birth

San Ignacio
Cayo
Belize
(City) (State/Province) (Country)

10. Current Physical Address (Do not list P.O. Box)
(A.P.O. Address Permitted)

42 Roseapple Street
(Address Line 1)
Belmopan, Belize
(City, State/Province, Country, Postal Code)
222-2222 (home), 666-6666 (cell)
(Phone Number(s))
iamthemommy@gmail.com
(Email Address)

Use this address if Consular Report of Birth will be mailed? Yes No

11. Full Name

Smith
Michael
Jay
(Last/Surname) (First) (Middle)

12. All Previous Legal Names Used

N/A
N/A
N/A
(Last/Surname) (First) (Middle)

N/A
N/A
N/A
(Last/Surname) (First) (Middle)

13. Sex 14. Date of Birth

M F
 11 / 06 / 1981
(month) (day) (year)

15. Place of Birth

Los Angeles
CA
United States
(City) (State/Province) (Country)

16. Current Physical Address (Do not list P.O. Box)
(A.P.O. Address Permitted)

42 Roseapple Street
(Address Line 1)
Belmopan, Belize
(City, State/Province, Country, Postal Code)
222-2222 (home), 666-6667 (cell)
(Phone Number(s))
iamthedaddy@gmail.com
(Email Address)

Use this address if Consular Report of Birth will be mailed? Yes No

17. Mailing Address (if different from Current Physical Address) (Do not list a P.O. Box.)
(You may list an A.P.O. address)

N/A
N/A
(Address Line 1) (City, State/Province, Country and Postal Code)

(Continued)

INFORMATION ON MOTHER/FATHER/PARENT

18. Citizenship
Were you a U.S. citizen or U.S. Non-Citizen National when the child was born?
 Yes No

(Continued)

INFORMATION ON MOTHER/FATHER/PARENT

19. Citizenship
Were you a U.S. citizen or U.S. Non-Citizen National when the child was born?
 Yes No

MARITAL STATUS OF THE PARENTS

20. Were you married to the child's other biological parent when the child was born? Yes No

21. Date and Place of Marriage to the child's other biological parent and current status

1 / 18 / 2010 Los Angeles CA United States
(month) (day) (year) (City) (State/Province) (Country)

Still Married Divorced / / Death / /
(month) (day) (year) (month) (day) (year)

(Continued)

INFORMATION ON MOTHER/FATHER/PARENT

22. Please list any other marriages (Show Name(s) of Spouse(s), Dates and Current Status) if applicable (Death, Divorce, Still Married). If you have never been married, enter "None." (If additional space is needed, please use the Section D Continuation Sheet)

None

(Continued)

INFORMATION ON MOTHER/FATHER/PARENT

23. Please list any other marriages (Show Name(s) of Spouse(s), Dates and Current Status) if applicable (Death, Divorce, Still Married). If you have never been married, enter "None." (If additional space is needed, please use the Section D Continuation Sheet)

I was married to Stacy Anne Rhodes from March 2, 2008 to December 1, 2009. We divorced, certificate is attached.

24. Precise Periods of Time in United States
(if additional space is needed, please use the Section D Continuation Sheet)

Place (City, State)	Date (month-day-year)	Date (month-day-year)
Los Angeles, CA	From 12-15-2009	To 01-29-2010
	From	To

25. Precise Periods of Time in United States
(if additional space is needed, please use the Section D Continuation Sheet)

Place (City, State)	Date (month-day-year)	Date (month-day-year)
Los Angeles, CA	From 11-06-1981	To 07-05-1999
Ft. Benning, GA	From 09-10-1999	To 05-05-2002
Los Angeles, CA	From 02-27-2005	To 09-19-2009
Los Angeles, CA	From 11-07-2009	To 01-29-2010
	From	To

(Continued)

INFORMATION ON MOTHER/FATHER/PARENT

26. Precise Periods Abroad in U.S. Armed Forces, in other U.S. Government Employment, with Qualifying International Organization, or as a dependent child of a person so employed (Specify) (if additional space is needed please use the Section D Continuation Sheet)

Branch/Agency/Org.	Date (month-day-year)	Date (month-day-year)
N/A	From	To
	From	To

(Continued)

INFORMATION ON MOTHER/FATHER/PARENT

27. Precise Periods Abroad in U.S. Armed Forces, in other U.S. Government Employment, with Qualifying International Organization, or as a dependent child of a person so employed (Specify) (if additional space is needed please use the Section D Continuation Sheet)

Branch/Agency/Org.	Date (month-day-year)	Date (month-day-year)
U.S. Army - Iraq	From 05-05-2002	To 06-10-2004
	From	To

B. THIS SECTION TO BE COMPLETED BEFORE/BY CONSULAR OFFICER, NOTARY PUBLIC, OR OTHER PERSON QUALIFIED TO ADMINISTER OATH

NOTE: If a U.S. citizen parent transmitting citizenship to the child born out of wedlock is not present, he or she may complete State Department Form DS 550 Affidavit of Parentage Physical Presence and Support and submit separately. Only the U.S. citizen father of a child born abroad out of wedlock must complete the acknowledgement of paternity and agreement to provide financial support.

28. I _____ do solemnly swear (or affirm) (check all that apply)
(Name)

I am a U.S. citizen or non-citizen national. I am the father of _____
(Name of Child)

who was born on _____ in _____ My child was born out of wedlock, and I am the
(Date of Birth) (Place of Birth)

the father through whom he/she is claiming U.S. citizenship. I agree to provide financial support for this child until he/she reaches the age of eighteen

(Signature of Affiant)

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

(Signature and Title of Administering Officer)

(SEAL)

(Continued)

THIS SECTION TO BE COMPLETED BEFORE/BY CONSULAR OFFICER, NOTARY PUBLIC, OR OTHER PERSON QUALIFIED TO ADMINISTER OATHS

29. Affirmation: I SOLEMNLY SWEAR (OR AFFIRM) THAT THE STATEMENTS MADE ON THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Name of Person(s) Providing Information _____ Relationship to the Child _____ Signature of Person(s) Providing Information _____
(Parent, Legal Guardian, Other (Specify))

Type Name and Title of Official _____ Signature of Official _____ City _____ Date _____
(month) (day) (year)

Subscribed to: (SEAL)

30. Approval of Consular Report of Birth

(Printed Name of Consular Officer) _____
(Signature of Consular Officer)

(Approving Post) _____
(month) (day) (year)
(Date of Approval)

(Registration Number)

C.

FOR OFFICIAL USE

31. Documents Presented - Please mark accordingly and provide date of document. (If more space is required, list on separate page)

Child's Birth Certificate ____/____/____ (month)(day)(year) _____ (City) _____ (Province) _____ (Country)

Marriage Certificate ____/____/____ ____/____/____ (month)(day)(year)(month)(day)(year) _____ (City) _____ (State) _____ (Province) _____ (Country)

Divorce Decree(s) (a) ____/____/____ ____/____/____ (month)(day)(year)(month)(day)(year) _____ (City) _____ (State) _____ (Province) _____ (Country)

(b) ____/____/____ ____/____/____ (month)(day)(year)(month)(day)(year) _____ (City) _____ (State) _____ (Province) _____ (Country)

(c) ____/____/____ ____/____/____ (month)(day)(year)(month)(day)(year) _____ (City) _____ (State) _____ (Province) _____ (Country)

Death Certificate(s) (a) ____/____/____ _____ (City) _____ (State) (b) ____/____/____ _____ (City) _____ (State)

Mother/Father/Parent's Passport _____ (Passport Number) ____/____/____ (month)(day)(year) _____ (Nationality) (Date of Issuance)

Mother/Father/Parent's Passport _____ (Passport Number) ____/____/____ (month)(day)(year) _____ (Nationality) (Date of Issuance)

Other Identity Document of Mother/Father/Parent (e.g. Naturalization Certificate) _____ (Name of the Citizenship Document) _____ (Document Number) ____/____/____ (month)(day)(year) (Date of Issuance)

Other Identity Document of Mother/Father/Parent (e.g. Naturalization Certificate) _____ (Name of the Citizenship Document) _____ (Document Number) ____/____/____ (month)(day)(year) (Date of Issuance)

Other Identity Document of Mother/Father/Parent (e.g. Driver's License) _____ (Name of the Identity Document) _____ (Document Number) ____/____/____ (month)(day)(year) (Date of Issuance)

Other Identity Document of Mother/Father/Parent (e.g. Driver's License) _____ (Name of the Identity Document) _____ (Document Number) ____/____/____ (month)(day)(year) (Date of Issuance)

Other (Legal Guardianship; Power of Attorney, etc.) _____ (Name of the Document) _____ (Document Number) ____/____/____ (month)(day)(year) (Date of Issuance)

D.

CONTINUATION SHEET (USE THIS SPACE FOR ADDITIONAL INFORMATION)