



# AFFIDAVIT OF IDENTIFYING WITNESS (IDENTIFICATION OF A PASSPORT APPLICANT)

This form should be completed **ONLY** by the identifying witness and is to **ONLY** be used in conjunction with form DS-11, Application for a U.S. Passport.

This affidavit must be accompanied by a photocopy of the front and back side of the witness' identification.

1. Passport Applicant's Name <i>(Last, First, Middle)</i>
2. How do you know the applicant?
3. How long have you <b>(the Witness)</b> known the passport applicant? <div style="text-align: right; margin-right: 50px;">_____ Years      _____ Months</div>

### WITNESS INFORMATION

4. <b>Witness'</b> Name <i>(Last, First, Middle)</i>		
5. <b>Witness'</b> Residential Address  City, State, ZIP Code		
6. <b>Witness'</b> Place of Birth <i>(City, State, Zip Code)</i>	7. <b>Witness'</b> Date of Birth <i>(mm-dd-yyyy)</i>	
8. <b>Witness'</b> Social Security Number	9. <b>Witness'</b> Home Telephone Number  (      )	10. Have you <b>(the Witness)</b> been issued a U.S. Passport? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, continue with questions 11 - 13.
11. <b>Witness'</b> Passport Number	12. Place of Issue <i>(if known)</i>	13. Date of Issue <i>(mm-dd-yyyy)</i> <i>If necessary, give approximate date.</i>

**NOTE TO THE WITNESS:** Read the following oath but **DO NOT SIGN** the affidavit until requested to do so by an Authorized Acceptance Agent.

I declare under penalty of perjury that I know or have reason to believe the above-named passport applicant is a citizen or non-citizen national of the United States; and the above statements are true and correct.

Signature \_\_\_\_\_ Date *(mm-dd-yyyy)* \_\_\_\_\_

### FOR ACCEPTANCE AGENT'S USE ONLY

Subscribed and sworn to (affirmed) before me  <div style="text-align: right;">(Seal)</div>	<input type="checkbox"/> Acceptance Agent _____ <input type="checkbox"/> Passport Staff Agent _____ Location <input type="checkbox"/> (Vice) Consul USA _____ Date <i>(mm-dd-yyyy)</i>
Signature _____	

### APPLICANT'S IDENTIFICATION

1. Issued in the Name of	Type of Document	Document Number
Place of Issue	Date of Issue <i>(mm-dd-yyyy)</i>	Date of Expiration <i>(mm-dd-yyyy)</i>
2. Issued in the Name of	Type of Document	Document Number
Place of Issue	Date of Issue <i>(mm-dd-yyyy)</i>	Date of Expiration <i>(mm-dd-yyyy)</i>

### WITNESS' IDENTIFICATION

Issued in the Name of	Type of Document	Document Number
Place of Issue	Date of Issue <i>(mm-dd-yyyy)</i>	Date of Expiration <i>(mm-dd-yyyy)</i>

## USE OF AFFIDAVIT OF IDENTIFYING WITNESS

This affidavit is required to be included with a passport application only when the applicant for a passport is unable to establish his or her identity to the satisfaction of a person authorized to accept passport applications. The applicant must still present some identification of his or her own. Witnesses must complete items one through ten (and if applicable, 11 through 13), sign when requested to do so by the same authorized acceptance agent who accepted the passport application, and present some form of current photo identification of his or her own. **The affidavit must be accompanied by a photocopy of the front and back side of the witness' identification.**

## WARNING

False statements made knowingly and willfully in passport applications or in affidavits or other supporting documents submitted therewith are punishable by fine and/or imprisonment under the provisions of 18 U.S.C. 1001, 18 U.S.C. 1542, and/or 18 U.S.C. 1621. Alteration or mutilation of a U.S. passport issued pursuant to this application is punishable by fine and/or imprisonment under the provisions of 18 U.S.C. 1543. The use of a U.S. passport in violation of the restrictions contained therein or of the passport regulations is punishable by fine and/or imprisonment under 18 U.S.C. 1544. All statements and documents are subject to verification.

## PRIVACY ACT STATEMENT

**AUTHORITIES:** Collection of the information solicited on this form is authorized by Titles 8, 22, and 26 of the United States Code, and other applicable laws and regulations, including 22 U.S.C. 211a et seq.; 8 U.S.C. 1104; Section 236 of the Admiral James W. Nance and Meg Donovan Foreign Relations Authorization Act, Fiscal Years 2000 and 2001; Executive Order 11295 (August 5, 1966); and 22 C.F.R. parts 50 and 51.

**PURPOSE:** The primary purpose for soliciting the information is to establish identity and entitlement for issuance of a U.S. passport.

**ROUTINE USES:** The information solicited on this form may be made available as a routine use to other government agencies and private contractors to assist the U.S. Department of State in adjudicating U.S. passport applications and requests for related services, and for law enforcement, fraud prevention, border security, counterterrorism, litigation activities, and administrative purposes. The information may be made available to foreign government agencies to fulfill passport control and immigration duties. The information may also be provided to foreign government agencies, international organizations and, in limited cases, private persons and organizations to investigate, prosecute, or otherwise address potential violations of law or to further the Secretary's responsibility for the protection of U.S. citizens and non-citizen nationals abroad. The information may be made available to the Department of Homeland Security and private employers for employment verification purposes. For a more detailed listing of the routine uses to which this information may be put see the Department of State's Prefatory Statement of Routine Uses relative to the Privacy Act (Public Notice 6290 of July 15, 2008) and the listing of routine users set forth in the System of Records Notices for Overseas Citizen Services Records (State-05) and Passport Records (State-26) published in the Federal Register.

If you include a social security number it may be provided to the U.S. Department of Treasury. Providing your social security number will also assist in expediting the adjudication of the passport application of the applicant. If you do not have a social security number, you may write 000-00-0000.

**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Failure to provide the information requested on this form may result in the denial of a U.S. passport, related documents, or service to the individual seeking such passport, documents, or service.

## PAPERWORK REDUCTION ACT STATEMENT

Public reporting burden for this collection of information is estimated to average 5 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: A/GIS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202.