UTENRIKS- DEPARTEMENTET				PASS	POR	TA	PPLICATI	ION	MINISTRY OF FOREIGN AFFAIRS				
PROOF OF IDENTITY:	must submit: Current Norwegian passport or American passport ors under the age of 18 must complete both pages												
PHOTOS			For children under the age of 12 only: 2 quality passport (for photo requirements please visit www.politiet.no)										
PAYMENT:		Passport fee: USD 53 for adults - USD 32 for children under 16. We only accept cashier's check and Money order											
Please use BLOCK CAPITA		TO BE COMPLETED BY APPLICANT							В	Please use BLOCK CAPITALS			
Birth date (dd.mm.yy)):	Norwegian personal #:			Place of	Place of birth (city, state):			Country	y of birth:	:		
Last name:					First no	First name:			Middle name:				
Address:						State:							
Zip code:	Zip code: City:								Country:				
Height in cm	Color	r of eyes: Color of hair.			r:		Any distinguishing features:						
Position:				Employer/fire	rm/univers	ity:	<u> </u>						
				Pr	rivate emai	il:		Priva			phone number :		
Have you ever had a p			Passp	port issuing au	ıthority:			When is	ssued?		ve you aquired another zenship		
Are you submitting yo passport with this app Yes No			Passp	port no:					intil:	If so	Yes No no, which?:		
Place:						Date (d	dd.mm.yy):						
										ignature	of applicant		
Has the previous pass invalidated***?	port be	en		TO BI	E CO	MPI	LETED BY	THE	<u> </u>	A	ttach photo here:		
Yes □ No □	1	ز ا	FO	REIGN	V SEI	RVI	CE MISSIO)N 0 .	NL Y	r			
Proof of identity: (Passport #, alien and exp date)		:											
							Issue date:			\dashv			
New passport nu (To be entered u			of fin	nished pas	sport)		Expires on:	Expires on:					
Passport fee:		<u></u>											
Application/personal details controlled by: (foreign service mission/place/date)							Initials/name	Initials/name stamp			ficial stamp		

UTENRIKS-DEPARTEMENTET

PASSPORT APPLICATION FOR MINOR

MINISTRY OF FOREIGN AFFAIRS

Parents must **consent in writing** to a passport issued to a child under the age of 18. At least one of the parents must accompany the child to the passport office. The absent parent must send his/her consent together with a the original, or notarized copy of his/her passport. Proof of **sole responsibility** for the child (awarded by a court order or agreement) must be presented. If the child is in the care of the **child welfare service**, written consent from the service is required.

		TO	BE COMPLET	TED BY PARE	NTS:				
Parents accomp	panying the	child:			ents' marital status in relation to each other: ed, separated, divorced, unmarried, cohabitant, widow/er):				
Both	□Father		☐ Mother	(married, separated, dive	orced, unmarried, c	ohabitant, widow/er):			
Parental respon	isibility:		I	Proof of sole respo	Proof of sole responsibility:				
Both	☐ Father		Mother						
Mother's name	(Capital letter	rs):			Mother's personal identity # (date of birth/ Norwegian personal number):				
Consent to the		ssport to my		Mother's passport #/citizenship:					
Mother's signal Father's name(s):		Father's personal identity # (date of birth/ Norwegian personal number.):					
Consent to the t		ssport to my	son/daughter (name):		Father's passport #/citizenship:				
Attachmen	ts	TO B	SE COMPLETE SERVICE	D BY THE FO E MISSION	REIGN	Comments			
				Comments:					