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**REPUBLIC OF KENYA**

**DEPARTMENT OF IMMIGRATION SERVICES**

**PARENTAL CONSENT**

I, ..... Tel: .....

P.O. BOX/ADDRESS .....

..... ID/PPT NO. ....

BEING THE PARENT / LEGAL GUARDIAN TO:

1) ..... D.O.B. \_\_/\_\_/\_\_\_\_

2) ..... D.O.B. \_\_/\_\_/\_\_\_\_

3) ..... D.O.B. \_\_/\_\_/\_\_\_\_

4) ..... D.O.B. \_\_/\_\_/\_\_\_\_

5) ..... D.O.B. \_\_/\_\_/\_\_\_\_

DO HEREBY VOLUNTARILY GIVE CONSENT TO THE DEPARTMENT OF IMMIGRATION SERVICES TO ISSUE KENYAN PASSPORT(S) TO THE ABOVE MINOR(S)

SIGN ..... DATE .....