AFFIDAVIT OF SUPPORT AND CONSENT WITH SPECIAL POWER OF ATTORNEY

I/We,single/married tosingle/married to							, with residence/postal address at			
in acc	orda	ance with	law, do he	ereby depose	e and state			after havin	ig been duly	sworn
	1.	I am/W	e are the pa	arent(s) of th	ne minor(s)	:				
				FULL	NAME				AGE	
	2.	. I am/We are giving my/our consent for my/our child/children to travel to;								
	3.	I am/We are responsible for the financial needs and well being of my/our child/children;								
	4.	. I am /We are appointing, as the le guardian to my/our minor child/children. He/she shall represent me/us in the filing application/s for Philippine passport/s of my/our child/children and other pertinent paper (such as DSWD Clearance and other documents) relevant to his/her/their travel abroad;								
	5.	I/We	allow	my/our	minor	children	to	travel	abroad	with
		(Name of Traveling Companion)								
		If the statement in (5) is not applicable, indicate below if child/children is/are traveling alone or with parents								
	IN	WITNE				eunto set my	-	gnature(s)	this	day of
	 (F <i>A</i>	ATHER'S S	SIGNATURE	OVER PRINTE	ED NAME)	 (MOT	THER'S S	IGNATURE C	VER PRINTED	NAME)