Passport Correction Checklist (Minors age 16-17)

One parent and the child must go in person to a Passport Acceptance Facility (usually a post office). \(^1\) If the clerk won’t accept something, ask to speak with a supervisor. Feel free to call us as well.

- Completed form DS-11 (https://www.state.gov/documents/organization/212239.pdf or get at the post office). You must use this form even if the child already has a passport. Fill out using the new name and gender. **Do not sign until in front of the passport agent.**

- One new 2 x 2 color passport photo.

- The minor’s current passport (if you have one).

- Photo ID for the minor (can be the current passport).

- Photocopy (single-sided) of the front and back of the minor’s photo ID.

- Photo ID for the accompanying parent.

- Photocopy (single-sided) of the front and back of that parent’s photo ID.

- Certified copy of the minor’s birth certificate (not necessary if you are submitting the minor’s current passport).

- A certified copy of the minor’s name change order;

- An original letter (not an emailed or scanned copy) from a medical doctor regarding the gender change (unless you never had a passport before and have a corrected birth certificate). If you **must** retain the original letter, you can request that they make a photocopy. \(^2\)

- Check or money order made out to the U.S. Department of State - $110 for a passport book, $140 for a passport book & passport card.

- $35 execution fee (can usually use credit/debit card, cash, money order, or personal check payable to the acceptance facility).

If no parent can go in person, the application should contain the following:

- Notarized consent affidavit from one parent (attached); and

- Photocopy of the front and back of that parent’s photo ID.

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\(^1\) Find your local facility here: http://iafdb.travel.state.gov

\(^2\) “If the applicant requests that the original medical certification be returned, you may attach a clear photocopy of the medical certification, clearly annotate that the original medical certification was seen and returned, and return the original medical certification to the applicant.” 7 FAM 1331 Appendix M, Adjudicating Gender Change Cases, https://fam.state.gov/fam/07fam/07fam1300apM.html
PARENT’S STATEMENT OF CONSENT
(Use only if no parent is going in person.)

STATE OF ______________
COUNTY OF ______________

MINOR’S NAME:
MINOR’S DATE OF BIRTH:

______________________________ (parent’s name) being duly sworn, deposes and
says:

1. I am over the age of eighteen and reside at

______________________________.

2. My phone number is ___________________ and my email address is

______________________________.

3. I give my consent to the issuance of a United States passport to my minor child,

______________________________, with my child’s new name and a

_________ gender designation.

______________________________
Parent’s signature

Sworn to before me this day of _____
______________________________, 20____

Type of Identification Presented by Parent:

ID Number: __________________________ Place of Issue __________________________
Issue Date (mm/dd/yy) __________________________ Expiration Date ________________

OATH: By signing this document, I certify that I am a licensed notary under laws and regulations
of the state or country for which I am performing my notarial duties, that I am not related to the
above affiant, that I have personally witnessed him/her sign this document, and
that I have properly verified the identity of the affiant by personally viewing the above notated
identification document and the matching photocopy.

______________________________
Notary Public