

Name of Applicant (Last, First, &amp; Middle)

SMITH, JACOB JOE

Date of Birth (mm/dd/yyyy)

10/12/1988

## 10. Parental Information

Mother/Father/Parent - First &amp; Middle Name (at Parent's Birth)

CASSIDY

Last Name (at Parent's Birth)

JONES

Date of Birth (mm/dd/yyyy)

04/05/1954

Place of Birth (City &amp; State if in the U.S. or City &amp; Country as it is presently known)

MIAMI, FL

Gender

☒ M  
☐ F  
☐ X

U.S. Citizen?

☒ Yes  
☐ No

Mother/Father/Parent - First &amp; Middle Name (at Parent's Birth)

ANTHONY

Last Name (at Parent's Birth)

RUSSEL

Date of Birth (mm/dd/yyyy)

05/04/1951

Place of Birth (City &amp; State if in the U.S. or City &amp; Country as it is presently known)

MIAMI, FL

Gender

☒ M  
☐ F  
☐ X

U.S. Citizen?

☒ Yes  
☐ No

## 11. Have you ever been married?

☐ Yes ☒ No If yes, complete the remaining items in #11.

Full Name of Current Spouse or Most Recent Spouse (Last, First &amp; Middle)

Date of Birth (mm/dd/yyyy)

Place of Birth

U.S. Citizen?

Date of Marriage

(mm/dd/yyyy)

Have you ever been widowed or divorced?

☐ Yes ☐ No

Widow/Divorce Date

(mm/dd/yyyy)

## 12. Additional Contact Phone Number

323-454-6767

☒ Home ☐ Work ☐ Cell

## 13. Occupation (if age 16 or older)

TEACHER

## 14. Employer or School (if applicable)

MIAMI HIGH SCHOOL

## 15. Height

6'1"

## 16. Hair Color

BROWN

## 17. Eye Color

GREEN

## 18. Travel Plans (If no travel plans, please write "none")

Departure Date (mm/dd/yyyy)

Return Date (mm/dd/yyyy)

NONE

NONE

## Countries to be Visited

NONE

## 19. Permanent Address (Complete if P.O. Box is listed under Mailing Address or if residence is different from Mailing Address. Do not list a P.O. Box.)

Street/RFD # or URB

Apartment/Unit

City

State

Zip Code

## 20. Your Emergency Contact (Provide the information of a person not traveling with you to be contacted in the event of an emergency.)

Name

Address: Street/RFD # or P.O. Box

Apartment/Unit

ANNE MARIE YOUTH

12 FLOWER STREET

10

City

State Zip Code

Phone Number

Relationship

MIAMI

FL

32012

555-555-5555

COLLEAGUE

## 21. Have you ever applied for or been issued a U.S. Passport Book or Passport Card?

☐ Yes ☒ No If yes, complete the remaining items in #21.

Name as printed on your most recent passport book

Most recent passport book number

Most recent passport book issue date (mm/dd/yyyy)

Status of your most recent passport book: ☐ Submitting with application ☐ Stolen ☐ Lost ☐ In my possession (if expired)

Name as printed on your most recent passport card

Most recent passport card number

Most recent passport card issue date (mm/dd/yyyy)

Status of your most recent passport card: ☐ Submitting with application ☐ Stolen ☐ Lost ☐ In my possession (if expired)

PLEASE DO NOT WRITE BELOW THIS LINE - FOR ISSUING OFFICE ONLY

Name as it appears on citizenship evidence

- ☐ Birth Certificate SR CR City Filed
- ☐ Nat./Cit. Cert. USCIS USCIS Date/Place Acquired
- ☐ Report of Birth Filed/Place
- ☐ Passport CR SR See #21 #1001
- ☐ Other
- ☐ Attached

Issued

AP

☐ Sole

Parent

☐ PIC of Cit. ☐ PIC of ID ☐ DS-71 ☐ DS-3053 ☐ DS-64 ☐ DS-5520 ☐ DS-5525 ☐ PAW ☐ APIC ☐ IRL ☐ Cit. Vis


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# Sample Ds Form

**Janusz Pawliszyn**



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