



# U.S. PASSPORT AMENDMENT/VALIDATION APPLICATION

Type or print in ink in white areas only. For more information, see back of form.

## IDENTIFYING INFORMATION

### CURRENT NAME

FIRST | MIDDLE

LAST

### MAILING ADDRESS

STREET

CITY, STATE, & ZIP CODE

IN CARE OF

SOCIAL SECURITY NUMBER

HOME PHONE (with Area Code)

BUSINESS PHONE (with Area Code)

SEX

Male  Female

PLACE OF BIRTH

City, State or Province, Country

DATE OF BIRTH

(mm-dd-yyyy)

DEPARTURE DATE, If Any

(mm-dd-yyyy)

U.S. PASSPORT NUMBER

DATE YOUR PASSPORT WAS ISSUED

(mm-dd-yyyy)

PLACE YOUR PASSPORT WAS ISSUED

PERMANENT ADDRESS (Street, City, State, Zip Code)

E-MAIL ADDRESS

## NAME CHANGE (Submit original or certified document)

NAME CURRENTLY IN PASSPORT

CHANGE NAME TO READ AS FOLLOWS:

### NAME CHANGED BY MARRIAGE

DATE OF MARRIAGE

(mm-dd-yyyy)

SPOUSE'S NAME IN FULL

### NAME CHANGED BY COURT ORDER

NAME OF COURT

LOCATION (City, State)

DATE

(mm-dd-yyyy)

### NAME CHANGED BY OTHER METHOD (Specify)

## OTHER PASSPORT REQUESTS: (Check appropriate box and specify, where necessary)

ADD VISA PAGES

CORRECT DESCRIPTIVE DATA (Specify)

EXTEND PASSPORT VALIDITY

OTHER (Specify)

OATH AND SIGNATURE I have not, since acquiring United States citizenship, performed any of the acts listed under "Acts or Conditions" on this application form (unless an explanatory statement is attached). I solemnly swear (or affirm) that the statements made on this application are true.

Date (mm-dd-yyyy)

Signature of Applicant

## FOR PASSPORT SERVICES USE ONLY

Evidence \_\_\_\_\_

Extend To \_\_\_\_\_

Name Change \_\_\_\_\_

Endorsement No. \_\_\_\_\_

Add Visa Pages \_\_\_\_\_

Limit To \_\_\_\_\_

Rewrite \_\_\_\_\_

Void Limitation on Page \_\_\_\_\_

Other \_\_\_\_\_

Examiner's Name

Office,

Date (mm-dd-yyyy)

**U.S. PASSPORT AMENDMENT/VALIDATION APPLICATION**

**ATTENTION: Was your passport recently issued? If there is an error in the descriptive data of your recently issued passport, please forward your request for correction to the respective issuing agency instead of the address listed below.**

**YOU MAY REQUEST AMENDMENT/VALIDATION OF YOUR PASSPORT FOR THE FOLLOWING REASONS ONLY:**

- **TO SHOW A CHANGE OF NAME.** Submit documentary evidence such as a certified court order, marriage certificate, or other satisfactory evidence to support a change of name.
- **TO CORRECT THE DESCRIPTIVE DATA.** Submit appropriate evidence to support correction of descriptive data.
- **TO ADD VISA SUPPLEMENT PAGES.**
- **TO EXTEND THE VALIDITY OF A LIMITED U.S. PASSPORT.** Submit appropriate evidence to support your request.
- **IN CERTAIN CASES, TO SHOW ENDORSEMENT OR VALIDATION OF YOUR U.S. PASSPORT.** Submit appropriate evidence.

**HOW TO APPLY FOR AMENDMENT/VALIDATION OF YOUR U.S. PASSPORT:**

- Complete, sign and date this passport amendment/validation application.
- Send it with your U.S. passport and any required additional evidence to:
 

Charleston Passport Center  
Attn: Amendments  
1269 Holland Street  
Charleston, SC 29405
- There is no fee to have a U.S. passport amended. Your amended U.S. passport and any documentary evidence submitted will be returned to you by first-class mail.
- For faster processing, you may request Expedited Service. Expedite requests will be processed in three workdays from receipt at the Passport Center. The fee for expedited service is \$60. Enclose the \$60 expedite fee in the form of a personal check or money order. All fees should be payable to the "U.S. Department of State." Do not send cash. Expedited Service is available only in the United States.
- If you desire Special Postal Service (overnight mail, special delivery, etc.), include appropriate postage fees or a pre-paid envelope.  
NOTE: The Passport Center will not mail a passport to a private address outside the United States.

**NOTICE TO APPLICANTS FOR THE AMENDMENT OR VALIDATION OF OFFICIAL, DIPLOMATIC, OR NO-FEE PASSPORTS:**

Submit your U.S. Government or military authorization in addition to the items listed above. Consult your sponsoring Agency for instructions on proper routing procedures before forwarding this application. Your amended/validated passport will be released to your sponsoring Agency for forwarding to you.

**ACTS OR CONDITIONS**

(If any of the below-mentioned acts or conditions have been performed by or apply to the applicant, the portion which applies should be lined out, and a supplementary explanatory statement under oath (or affirmation) by the applicant should be attached and made a part of this application.) I have not, since acquiring United States citizenship, been naturalized as a citizen of a foreign state; taken an oath or made an affirmation or other formal declaration of allegiance to a foreign state; entered or served in the armed forces of a foreign state; accepted or performed the duties of any office, post, or employment under the government of a foreign state or political subdivision thereof; made a formal renunciation of nationality either in the United States, or before a diplomatic or consular officer of the United States in a foreign state; or been convicted by a court or court martial of competent jurisdiction of committing any act of treason against, or attempting by force to overthrow, or bearing arms against, the United States, or conspiring to overthrow, put down, or to destroy by force, the Government of the United States.

**WARNING:** False statements made knowingly and willfully in passport applications or in affidavits or other supporting documents submitted therewith are punishable by fine and/or imprisonment under provisions of 18 U.S.C. 1001 and/or 18 U.S.C. 1542. Alteration or mutilation of a U.S. passport is punishable by fine and/or imprisonment under the provisions of 18 U.S.C. 1543. The use of a U.S. passport in violation of the restrictions contained therein or of the passport regulations is punishable by fine and/or imprisonment under 18 U.S.C. 1544. All statements and documents submitted are subject to verification.

**PRIVACY ACT AND PAPERWORK REDUCTION ACT STATEMENTS**

**AUTHORITIES:** The information solicited on this form is requested pursuant to provisions in Titles 8 and 22 of the United States Code (U.S.C.), whether or not codified, including specifically 22 U.S.C. 211a and all regulations issued pursuant to Executive Order 11295 (August 5, 1966), including Part 51, Title 22, Code of Federal Regulations (CFR).

**PURPOSE:** The primary purpose for soliciting the information is to establish citizenship, identity, and entitlement to the amendment and/or validation of a U. S. passport. The information may also be used in connection with issuing other travel documents or evidence of citizenship, and in furtherance of the Secretary's responsibility for the protection of U.S. nationals abroad.

**ROUTINE USES:** The information solicited on this form may be made available as a routine use to other government agencies, to assist the U.S. Department of State in adjudicating passport applications and requests for related services, and for law enforcement and administrative purposes. It may also be disclosed pursuant to court order. The information may be made available to foreign government agencies to fulfill passport control and immigration duties or to investigate or prosecute violations of law. The information may be made available to private U.S. citizen 'wardens' designated by U.S. embassies and consulates.

Except as noted, failure to provide the information requested on this form may also result in the denial of a United States passport, related document, or service to the individual seeking such passport, document, or service. The disclosure of your social security number on this form is voluntary and in accordance with the authorities listed above and will be used in the processing of your application for passport amendment and/or validation and as described in the preceding paragraphs.

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. You do not have to provide the information unless this collection displays a currently valid OMB number. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: U.S. Department of State (A/RPS/DIR) Washington, DC 20520.