

DATE:    /    /

## Letter of Consent

I, \_\_\_\_\_, consent to my son/daughter  
(Parent Full Name)

\_\_\_\_\_ 's application for the following.  
(Child's Full Name)

- Japanese passport
- Travel Document for return to Japan
- Cancelling his/ her previous passport

Legal Representative Name: \_\_\_\_\_  
(Parent Full Name)

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_  
(Parent Signature)

**\*Please submit this consent with a copy of your valid photo ID.**