



Consulate General of Nigeria

LETTER OF AUTHORIZATION (CHILDREN UNDER 18)

I, _____ (FATHER) and;
First Name Middle Name Last Name

I, _____ (MOTHER)
First Name Middle Name Last Name

Authorize our child/children;

Name(s)			Birth Date
_____	_____	_____	_____
First Name	Middle Name	Last Name	Month/Day/Year
_____	_____	_____	_____
First Name	Middle Name	Last Name	Month/Day/Year
_____	_____	_____	_____
First Name	Middle Name	Last Name	Month/Day/Year

To apply for: - Visa to travel to Nigeria
 - Nigerian Passport

(Signature of Father) (Date)

(Signature of Mother) (Date)

➔ PLEASE SUBMIT FORM WITH COPY OF PARENTS' PASSPORT DATA PAGE AND BIRTH CERTIFICATE OF CHILD/CHILDREN