



48th Force Support Squadron

PASSPORT/VISA OFFICE

48FSS.Passports@us.af.mil

NEWBORN PACKAGE

48 FSS/Passport Office Hours of Operation:

Monday-Friday 0830-1030 <u>APPOINTMENT ONLY</u> (Email/Call to Schedule) CLOSED: Third Wednesday of the month, USAFE Family Days, US Federal Holidays, and Goal Days 48fss.passports@us.af.mil / DSN: 226-1210 / COMM: 01638 52 1210

Purpose of the Newborn Package: The Newborn Package will assist members when applying for a newborn's Consular Report of Birth Abroad, Tourist Passport, and Social Security Card. Parents may complete appointments listed below through the RAFL Passport Office or go to the US Embassy in London to apply in one visit (to schedule an appointment, visit UK USEMBASSY.GOV). After receiving the Consular Report of Birth Abroad, you may apply for the No-Fee.

<u>Please Note: We will NOT hold on to any documents or complete any forms on-line for the member.</u> Failure to provide all required documents and incorrectly filled out forms will result in appointment being rescheduled for a later date.

CONSULAR REPORT OF BIRTH ABROAD, TOURIST PASSPORT (optional), & SSN

(Estimated processing time: 6-8 weeks for CRBA & PPT, additional 5-6 weeks after that for SSN to arrive)

Items Required for Consular Report of Birth Abroad:

- DS-2029 Application Form (https://eforms.state.gov/Forms/ds2029.pdf)

(Please use the Passport Office address for block 5. mailing address-our address is listed on pg. 2)

- *Do not sign the application form until a Passport Agent is present and has reviewed it*
- Money Order for \$100.00 made to "US DISBURSING OFFICER"

 (2) Two Royal Mail Special Delivery Envelopes (A4 size ~ 13.5 x 10 in) with prepaid postage up to 500g from the British Post Office.

- Copy of Parents' Photo ID (Embassy requires front and back of military ID on single sided paper)
- Proof of Parents' Previous Physical Residence in the US(i.e.Education records or transcripts, employment or military records/SURF+Orders)
 - The following ORIGINAL DOCUMENTS are required to be sent with the application:
 - British Birth Certificate (bring original and 3 copies)
 - · Parents' Marriage Certificate (bring original and 1 copy)
 - o Parents' Passports OR Birth Certificates OR Naturalization Certificates (bring originals and 1 copy)
 - Divorce Decrees (if either parent has ever been married before; bring original(s) and 1 copy)
 - o Any Official Name Change Document (bring original and 1 copy)

Items Required for **optional** Tourist Passport Book:

 DS-11 Application Form *must use the FORM FILLER version* (MUST be filled in Online/link & guidance on second page) (Application <u>CANNOT</u> be hand written, it <u>MUST</u> be generated by the online questionnaire—Link on back.) (Please use your UK Physical mailing address—passport will still be returned to the Passport Office)

* Do not sign the application form until a Passport Agent is present and has reviewed it *

- Money Orders one for \$135.00 made to "US DEPARTMENT OF STATE"
- (1) One Passport Photos Size 2x2 (Kodak Store in BX No Glasses taken within the last 6 months)
- Copy of Parents' Photo ID (Embassy requires front and back of military ID on same side of the paper)

Items Required for Social Security Card:

- SS-5 Application (https://www.ssa.gov/forms/ss-5.pdf)
- (The embassy recommends using a U.S. address for shipping. You may use your APO address for the mailing address) * Do NOT sign or date the application form until a Passport Agent is present and has reviewed it *
- Copy of Signing Parent's Passport (bring originals and 1 copy)
- Copy of Signing Parent's Photo ID (Embassy requires front and back of military ID on same side of the paper)

Note: Both parents and child need to be present at the appointment. If one parent cannot attend the appointment, an original DS-5507 (certified by a passport agent or consular official) will be required for the CRBA application, AND an original notarized DS-3053 will be required for the Tourist Passport application. Please bring 2 different photocopies of ID's along with the forms. Email or call for any questions.

(Links: https://eforms.state.gov/Forms/ds5507.pdf & https://eforms.state.gov/Forms/ds3053.pdf)

GUIDE FOR FILLING OUT THE DS 11 APPLICATION (TOURIST PASSPORT)

To create the DS-11 form, complete the questionnaire Online using the following link: https://pptform.state.gov/ First Screen: Enter applicant personal information Second Screen: Enter your PHYSICAL UK address Third Screen: Enter dates of upcoming travel (if applicable) Fourth Screen: Emergency Contact Information (Someone not traveling with you) Fifth Screen: Enter your MOST RECENT passport information (if applicable) Sixth Screen (for DS-11): Applicant must enter all parental information as it appears on their birth certificate (if applicable). Only put unknown if one parent is not on the applicant's birth certificate. Continue Completing Remaining Prompts: *Please select desired book and/or Card for the Price. Requesting a passport card will be an additional cost than listed on page 1. If requesting this additional documents, you will be required to bring a money order for the full fee (the + execution fee).

***Processing cannot be expedited overseas ***

On the Final Screen, Please create and print application

*NOTE: APPLICATIONS MUST BE PRINTED SINGLE SIDED ON 8 1/2 X 11PAPER

GUIDE FOR FILLING OUT THE 2029 APPLICATION (CRBA)

Page 1:

Section A. This section to be completed by the child's parent(s) or guardian(s) or the child

- Fill out all blocks on page 1

-Block 2g & 3g list your PHYSICAL UK address (no apo)

Page 2:

- Fill out all blocks on page 2
- Block 2j-k &3j-k
 - Dates need to be as accurate as possible (MM/DD/YYY) OR (MM/YYYY) if day is not possible
 - Dates should start with parents DOB and work to most current date (in order)
 - Most current date should end with the Baby's Birth Date
 - Dates should NOT overlap. (i.e. if you left 04/11/2020 your next date should be 04/12/2020)
 - Block 2j & 3j will list ALL city/states you have lived in the US for 1+ years
 - Blocks 2k & 3k will list ALL overseas places you have lived/visited for 3+ weeks

(include TDY and Deployments)

- Blocks 2k & 3k may list USAF AD, USAF Dependent, and/or DoD Civilian OR any country/base you have visited for 3+ weeks

2029 box 5 address:	City: Province: Country:	RAF LAKENHEATH PASSPORT OFFICE BRANDON SUFFOLK UNITED KINGDOM IP27 9PN
---------------------	--------------------------------	--

Picture examples will be on Powerpoint Please email 48fss.passports@us.af.mil with any questions

Providing Proof of Physical Presence for the CRBA application

How do I show that I was physically present in the United States prior to my

child's birth?

In general, "physical presence" is counted as the time (before the birth of your child) that you were actually physically within the borders of the United States.

- Usually, physical presence does not need to be continuous, and visits of any length to the U.S.A. would count towards fulfilling the physical presence requirement;
- · Conversely, any travel outside of the United States, including vacations, must be excluded;
- For purposes of the Consular Report of Birth Abroad (CRBA), it does not matter whether you were in the U.S.A. legally or illegally, or whether you were a U.S. citizen or a visitor to the U.S.A.;
- Time spent overseas for honorable U.S. military service or as the dependent of someone honorably serving in U.S. military often counts, but you will need to provide official records;
- Time spent while employed with the U.S. government or certain international organizations or as the dependent of someone employed by the U.S. government or certain international organizations - may also count, but you will need to provide official records.

What types of documents may show that I was physically present in the United States?

You are the person who knows what you were doing when you were physically in the United States and may offer any proof you believe shows that you were actually there. You may have documents unique to your case - please feel welcome to provide them. However, some documentation has proven easier for many applicants to obtain, and for consular officers to use:

- · Official school transcripts from primary, secondary or university education;
- Current and expired passports (both U.S. and foreign) with evidence of travel to the United States (but be aware that these must show both entries and exits to the U.S.A. - if you have used different passports to enter and exit the U.S.A., your actual travel dates may be difficult to establish);
- Military records of honorable service such as a Military Statement of Service or 00-214 Separation Statement;
- Prison records;

What types of documents do not show that I was physically present In the United States?

- A U.S. driver's license (does not show exactly when you were present in the U.S.A. or for how long);
- A diploma without relevant school transcripts (because a person may have earned or transferred credits from study abroad);
- A lease or mortgage for a residence (many people maintain residences in numerous countries or property abroad for rental purposes);
- Cell phone records;
- General financial statements that do not show your physical U.S. location (many people hold bank accounts
 around the world without actually spending time in those specific countries);
- Social media records that merely mention being in the U.S.A.;
- Income tax forms without pay stubs or W-2s (taxes can be paid from anywhere in the world).

Please double check the requirements through:

https://travel.state.gov/content/travel/en/legal/travel-legal-considerations/us-citizenship/Acquisition-US-Citizenship-Child-Born-Abroad.html

<u>Guidance for DS-2029 Precise Periods of Time in the U.S. and Precise Periods</u> <u>Abroad in U.S.Armed Forces</u>

- Dates need to be as accurate as possible in full date format (month-day-year).

-Dates should start with the parent's date of birth (if born in the United States), or the first time they entered the United States if born outside the US.

- Please start with the earliest date and work forward (birth to current)

-Most current residence location should start with arrival date and end with the date of child's birth

-Dates should not overlap, if you were last in one location on March 8, 2020, your next location should start March 9, 2020.

-In block 26 and 27 will be oversees locations as part of the military listed as USAF AD, USAF Dependent, or DoD CIV

Ekaphale Peters State) Page 2, Question 24.	Date From (Month-Day-Year)	Date To (Month-Day-Year)
Daytona Beach, FL	09-06-1971	10-30-1990
Dayton, OH	03-10-1996	04-05-1997
San Antonio, TX	04-06-1997	11-01-1999

Page 3, Question 26.

Branch/Agency/Org	Date From (Month-Day-Year)	Date To (Month-Day-Year)
USAF AD	10-31-1990	03-09-1996
USAF AD	11-02-1999	08-01-2010

Command Sponsorship (Spouse+ Newborns)

Please refer to the CSP package for the benefits/entitlements

You can acquire the command sponsorship package, alongside the AF965 via the SharePoint.

https://usaf.dps.mil/sites/48FW/48thMissionSupportGroup/48FSS/MPF1/SitePag es/Home.aspx

Newborns Checklist

- o Completed Command Sponsorship memo (page 7) SIGNED BY THE PASSPORT AGENT
- o Medical Clearance letter
- DD Form 1172 (DEER Enrollment) <u>WITH PHYSICAL ADDRESS</u> (Obtained from MPF Customer Support Section during enrollment process)
- o AF Form 899 (PCS orders to RAFL) to include all amendments
- o AF form 965, Overseas Tour Election Statement (initial Block 2)- **ONLY** if currently serving unaccompanied tour

Spouse Checklist

- o Completed Command Sponsorship memo (page 5) SIGNED BY THE PASSPORT AGENT
- o AF Form 1466, Medical Clearance (EFMP office 226-8954)
- o AF Form 965, Overseas Tour Election Statement (initial Block 2)- **ONLY** if currently serving unaccompanied tour
- DD Form 1172 (DEER Enrollment) <u>WITH PHYSICAL ADDRESS</u> (obtained from MPF Customer Support Section during enrollment process)
- o AF Form 899 (PCS orders to RAFL) to include all amendments

If you have any questions regarding any of the information provided or are looking for further information, please utilize the <u>48FSS.FSPD.OutboundAssignments@us.af</u> email. Once you have acquired all of the documents, please send them to the email listed for review.

The processing time for a CSP to be approved is 1-3 weeks.

If you are trying to complete a Dependent Transfer Mil-Mil or a Military spouse Retires/Separates, please contact the email listed above or refer to the command sponsorship package found on the SharePoint for the required documents



APPLICATION FOR CONSULAR REPORT OF BIRTH ABROAD OF A CITIZEN OF THE UNITED STATES OF AMERICA

Registration Number

A. THIS SECTION TO BE COMPLETED BY THE CHILD'S PARENT(S) OR GUARDIAN(S) OR THE CHILD (Use Section E Continuation Sheet If Additional Space Is Needed)														
			THE CH		,									
1a. Name of Child in Full														
Last/Surname	me First						Middle							
1b. Sex	1c. Date of	Birth	1d. Place of	Birth										
☐ Male	month day year		City		Country									
	NALUT N ER/PARENT	IOTHER/F	ATHER/PAR	ENT	3. INFORMATION ABOUT									
NOTE: If the U.S. citize, parent chanseling citie whip to be child a not present, he or she may complete Form DS-5507 Affid Physical Press de or Residence and a superturned ubreat separately. The parent complete Form DS-5507 Affid provide information and to parent completing to Form D -55 7 or the DS-2 9 Form but instead should check the box before following statement below: E-Please set the completion proving Form DS-5 507.										ed not				
	a. Full Name irs! <i>Middle</i>	Last/Surr	ame					Firs		Middle				
2b. All Previous Le	gal Names Us	ed 3b. All Pr	evious Legal N	lames L	Jsed									
Last/Surname F	irs! Middle	Last/Surra	ame First							Middle	Middle			
Last/Surname	First		Middle		Last/S	urname		First		Middle				
Last/Surname	First		Middle		Last/S	urname		First		Middle	Middle			
2c. Sex		2d. Date of	f Birth		3c. Sex3d. Date of Birth									
🗌 Male 🗌 Femal	e	month da	y ye	ar	☐ Male ☐ Female month day year						year			
2e. Citizenship: We Non-Citizen Na 2f. Place of Birth	•				Ci	•	onal w	you a U.S. hen the chil			□ Yes □ No			
City	State/Provir		Country		City State/Province					Country				
			oouniy		City				e country					
2g. Current Physica P.O. Box. APO/FI					•	,				formation (as mailing				
P.O. Box. APO/FPO/DPO permitted) Same as mailing address Address Please List PHYSICAL UK						Address Please List PHYSICAL UK								
City, State/Province, Country, Postal Code						City, State/Province, Country, Postal Code								
Phone Number(s)	Imber(s) Email Address				Phone	Number(s)		Email Address					
2h and 3h. Marital Status of the Parents (This item requires a single response regarding both parents)														
Were the biological parents married to each other when the child was born? \Box Yes \Box No														
Date and Place of Marriage to the child's other biological parent:					month day year City, State/Province, Country					/				
	 Still Marrie 				ay	year		eceased	month	day	year			
Marital Status:			Date:			,		Date:		,	,			

	l you like to				□ Pick-up □Mail <mark> D. Box, APO/FPO/DPO p EQ Kingdom</mark> try Postal						
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
s USAF AE)	From7/27/2020		ate	From	То					
Branch/Agency/O	ſр	Date (month-day-year)	Date (month-oay-year)	Branch/Agency/Org.	Date (month-day-year)	Date (month-day-yea					
Government organization	t employmen i, or as a dep	rmed Forces, in oth t, with qualifying int endent child of a pen enstructions on Instru	ernational erson so	Government en organization, or	in U.S. Armed Forces, in othe poloyment, with qualifying in as a dependent child of a p ase see instructions on Instr	ternational erson so					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
		From	То		From	То					
i ortiariu	, 🗸	From	То		From	То					
(City, State) Portland		^{Date} (<i>month-day-year</i>) From6/20/2018	(<i>month-day-year</i>) To 07/26/2020	(City, State)	<i>(month-day-year)</i> From	<i>(month-day-yea</i> To					
2j. Precise Perio instructions c Psen Antor (City, State)	on Instruction	Data	Dat <mark>e_{6/19/2018} (month-day-year)</mark>	<i>instructions on Ir</i> Place	of Time in United States (<i>Pl</i> nstruction Page 1.) Date	Date					
				-							
Married). ^{If yo} additional spa Continuation	ace is many	, , , , , , , , , , , , , , , , , , , ,	t "one."	Married) yo		nter "None." ^{(If}					
Dates and Ci		^{iages} (Show Name) ^{if applichte} (Deal	e(s) of Spouse(s), the ivorce, Service	Dates a. Cul	other marriages (Show Name ont Status) i	e(s) of Spouse(: th, Divorce, Stil					
2. INFORMAT	ION ABOU	T MOTHER/FAT	HER/PARENT	3. INFORMATIO	N ABOUT MOTHER/FAT	HER/PARENT					
	(0	ontinued)		(Continued)							

Must have a 2D bar code. Use FORM FILLER	U.S. Department of State APPLICATION FOR A U.S. PASSPO Use <u>black ink</u> only. If you make an error, complete a new form.											Expirat Estima	Control No tion Date: ted Burde	04/30/2	2025
online	Select docur	ment(s) for w	nich yo	u are su	bmittir	ng fees:									
	U.S. Passport The U.S. passport c Regular Bo The large book is t	ard is <u>not</u> valid for ir ok (Standard)	ternational	Large Bo	ee Instruc ook (Nor	tion Page 3 n-Standard									
	1. Name Last						0								
	DOE								D	0	S	NF	२		
2007-0-1 2007-0-1	First					Mid	Idlo		End. #			E>	кр		
						IVIIC	IUIE								
	JANE														
	2. Date of Birth (mm/dd/		· ·	ad Instructic anging gender	U ,	4. Place of	Birth (C	ity & State	e if in the	US or C	City & Co	ountry as	s it is preser	ntly known	()
	01 30 201	.9		Yes	marrier :	CAIR	.O, M	IO							
	5. Social Security Numb	er	6. Ema	i <mark>il</mark> (See ap _l	olication	status at pa	ssportsta	tus.state	.gov) 7 .	. Prima	ary Co	ntact F	hone Nu	ımber	
	000 00 000		e GMA	IL.CO	M	078-	-677-	-777'	77						
8. Mailing	g Address Line 1: Street/RF	-D#, P.O. Box, e	or URB												
	Mus	t be you	r UK	Addr	ess										
Address	VEY WAY ine 2: (Include Apar					are Of" of t	the pare	nt. Exan	nple: In	Care O	f - Jan	e Doel			
												0 2 0 0,			
City				Stat	to.	Zip Code			Cour	ntru (if	outsic	to tha l	Jnited Sta	otocl	
				Sta	le									nes)	
BRAND						IP27			_	ITEL		-	-		
9. List al	I other names you have us	ed. (Examples:	Birth Nai	me, Maide	en, Prev	rious Marria	age, Leg	al Name	e Chang	ge. <mark>A</mark> tta	ich ad	ditional	pages if	needed.)
А.						В.									
				S	STOF	P! COI	NTIN	UE 1	το ρ	AG	Ε2.	4 ⁻			
STAPLE		STAPLE DO NOT	SIGN A	APPLIC	ATION	N UNTIL	REQU	IESTE	DTO	DO S	о вү	AUT	HORIZI	ED AG	ÉNT
STA		P Identifying				other/Fathe		-			nd Sigr			tifying m	inor)
		Driver's	License	State I	ssued ID (Card	Passp	ort		tary		Other.			
5	1 3/1 - L	Name													
2"×		× Issue Date (mm/dd/yyyy)					Exp. D: (<i>mm/dd/</i>)							e of ance	
											untry of				
ш		S ID No									uance				
STAPLE		P				lother/Fath		-			d Signa			ifying mir	nor)
Lo fal	Attach a color photograph ken within the last six months		License	State	ssued ID (Uard L	Passp	ort	Mili	tary		Other .			
		Name													
Acceptar	nce Agent (Vice) Consul US	A Issue Date (mm/dd/yyyy)					Exp. Da (<i>mm/dd/y</i>						Stat Issu	e of ance	
	Passport Staff Agent									1		-			
		ID No									intry of iance				
		l de have	clare unde not perfo	er penalty operation of the second	of perjury of the a	all of the fo	ollowing: nder "Act	1) Iama s or Cor	a citizen nditions"	or non-c on page	itizen r e 4 of tl	national he instru	of the Unit uctions of t	ted States his applic	s and cation
	(Seal)	(unle	ess explan	atory state	ment is a	attached); 2) se stateme	the state	ments m	ade on th	ne applic	ation a	ire true a	and correct	t: 3) hav	e not
		phot	ograph att	tached to t	his appli	cation is a g	enuine, c	current ph	hotograph	n of me;	and 5) I have	read and u	understoo	d the
	_		0 1 3	0											
				Data		x		Applicar	nt's Lega	al Signat	ture - a	ige 16 a	nd older		
, i i i i i i i i i i i i i i i i i i i	ature of person authorized to accept a			Date		7			0	0		•			
	ng this form, I certify that I have provi witnessed the applicant's/legal guard		Ĺ			_ x	ath ar/Eat	har/Dara	mt/Logol	Cuardi	an'a Ci		/if identify	ing minor	
			Ag	gent ID Numl	ber		otner/Fat	ner/Pare	ent/Legal	Guardi	an's Si	gnature	(if identify	ing minor,)
	Print Facility Name/Location														
			Fa	acility ID Num	nber	- x	other/Fat	her/Pare	ent/Legal	Guardi	an's Si	gnature	(if identify	ing minor))
	Name of courier company (if application	able)							,		<u>s li</u>	Mili	8 0 8	pnp	10
For Issuina O	ffice Only> Bk	Card I	er [104	4 <u>-2</u> 02	22	Other		018210	r#illi	900 K II 1199	a 11 8716871	1.642112471741	217911
	,	· •													

Form SS-5 (10-2021) UF Use (11-2019) UF Until Stock Is Exhausted DO NOT SIGN AND DATE PLEASE SOCIAL SECURITY ADMINISTRATION

Page 5 of 5 OMB No. 0960-0066

Application for a Social Security Card NAME First Full Middle Name Last TO BE SHOWN ON CARD Full Middle Name First last FULL NAME AT BIRTH 1 IF OTHER THAN ABOVE OTHER NAMES USED Social Security number previously assigned to the person 2 listed in item 1 PLACE OF DATE Office 3 Use Only BIRTH 4 OF BIRTH FCI (Do Not Abbreviate) City State or Foreign Country MM/DD/YYYY Legal Alien Not Allowed To Work(See Instructions On Page 3) Legal Alien Other (See CITIZENSHIP 5 Instructions On Page 3) U.S. Citizen Allowed To (Check One) Work RACE ETHNICITY Other Pacific American Indian Native Hawaiian Islander Are You Hispanic or Latino? Select One or More 7 6 Alaska Native Black/African White (Your Response is Voluntary) (Your Response American Asian Yes No is Voluntary) SEX 8 Male Female First Full Middle Name Last A. PARENT/ MOTHER'S NAME AT HER BIRTH 9 B. PARENT/ MOTHER'S SOCIAL SECURITY Unknown NUMBER (See instructions for 9B on Page 3) First Full Middle Name last A. PARENT/ FATHER'S NAME 10 B. PARENT/ FATHER'S SOCIAL SECURITY Unknown NUMBER (See instructions for 10B on Page 3) Has the person listed in item 1 or anyone acting on his/her behalf ever filed for or received a Social Security number card 11 before? Don't Know (If "don't know," skip to question 14.) Yes (If "yes" answer questions 12-13) No First Full Middle Name Last Name shown on the most recent Social 12 Security card issued for the person listed in item 1 Enter any different date of birth if used on an 13 earlier application for a card MM/DD/YYYY DAYTIME PHONE DO ΝΟΤ TODAY'S 15 14 DATE MM/DD/YYYY NUMBER Area Code Number Street Address, Apt. No., PO Box, Rural Route No. MAILING ADDRESS 16 City State/Foreign Country ZIP Code (Do Not Abbreviate) I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best of my knowledge. 17 YOUR SIGNATURE YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: 18 Legal Other Natural Or Self DO NOT SIGN Adoptive Parent Guardian Specify DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY) NPN DOC CAN ITV NTI PBC PRA EVI EVA EVC NWR DNR UNIT SIGNATURE AND TITLE OF EMPLOYEE(S) EVIDENCE SUBMITTED REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW DATE

DCL

DATE

NEWBORN PACKAGE VISUAL HELP

