**SPECIAL POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS:

That I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_ citizen, of legal age and

(first name, middle name, and last name) (citizenship)

resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby appoint, name,

(complete address)

and constitute \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_ citizen, of legal age and

(first name, middle name, and last name of representative) (citizenship)

resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Philippines to be my

(complete address)

true and lawful attorney-in-fact/representative to act for and in my name and stead, and on my behalf to do and execute any or all of the following acts, deeds, and things, to wit:

[ ] Accompany my minor child(ren)/ward(s), whose name/s appear/s below in applying for a Philippine passport at the Department of Foreign Affairs of the Philippines;

[ ] Apply for the DSWD travel clearance of my minor child(ren)/ward(s) listed below;

[ ] Apply for a visa to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on behalf of my minor child(ren)/ward(s) listed below;

[ ] Apply for the PSA Birth Certificate/s and other personal document/s of my minor child(ren)/ward(s) listed below, in connection with my child(ren)/ward(s) passport and visa applications.

Name(s) of my minor child(ren)/ward(s):

* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HEREBY GIVING AND GRANTING unto my attorney-in-fact/representative full power and authority to execute and perform every act necessary to render effective the special power granted in this instrument, as though I myself have so performed it, and HEREBY APPROVING AND RATIFYING ALL that he may do by virtue thereof.

This special power of attorney shall be in effect –

For \_\_\_\_ month(s)/year(s)

Until the completion of the object or purpose above-stated

Until revoked.

IN WITNESS WHEREOF, I have hereunto signed my name this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_ at the Consulate General of the Philippines, Frankfurt am Main, Germany.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiant

FOREIGN SERVICE OF THE PHILIPPINES )

Consulate General of the Philippines ) S.S.

Frankfurt, Germany )

SUBSCRIBED AND SWORN TO before me this day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_ in Frankfurt, Germany, affiant exhibiting to me his/her passport.

Doc. no.: \_\_\_\_\_\_\_\_\_\_

Book no.: \_\_\_\_\_\_\_\_\_\_

Page no.: \_\_\_\_\_\_\_\_\_\_

Service no.: \_\_\_\_\_\_\_\_\_\_

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Fee paid: Euro 27.50

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*Administering Officer*