



**Consulate General of Nigeria**

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**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**