

DECLARATION TO BE SWORN BY THE SOLE GUARDIAN OF THE CHILDREN

oaths.	St De S	WOIII	or ae	Clare	ea De	7016	аρ	2150	II at	ILTIO	risec	ПОУ	Iaw	lo a	arriii	IISLE	,
(full name)																	
Person ID							-										
of (full address)																	
aged ye	ars and	d upw	ards,	, mal	ke oa	ath a	ınd s	ay a	s fo	llow	/s:-		·				
I am the sole guard	dian of:																
(Child one)																	
Person ID					-												
born the	day of										in t	he y	⁄ear				
(Child two)																	
Person ID					-												
born the	day of										in t	he y	⁄ear				
(Child three)																	
Person ID					-												
born the	day of										in t	he y	⁄ear				

Seachadadh Seirbhísí Inimirce, An Roinn Dlí agus Cirt 13/14 Cé an Bhúrcaigh, Baile Átha Cliath 2, D02 XK70 *Immigration Service Delivery, Department of Justice 13-14 Burgh Quay Dublin 2, D02 XK70*





(For any further children, please attach an additional page containing the above details)

I beg to refer to the birth certificates of the said children upon which, marked with the letter "X", I have signed my name prior to the swearing hereof.

I say that I am the sole guardian of the said children and that:

- there is no other guardian of the said children pursuant to the Guardianship of Infants Act 1964:
- there is no court order giving any other person guardianship over the said children, or rights and responsibilities equivalent to guardianship over the said children, or parental responsibility in relation to the said children;
- I have not entered into any arrangement or agreement which has the effect of making, or purports to make any other person a guardian of the said children jointly with me, or otherwise relating to any other person having rights and responsibilities equivalent to guardianship over the said children, or having parental responsibility in relation to the said children;
- no other person is a guardian, or has rights and responsibilities equivalent to guardianship over the said children, or has parental responsibility in relation to the said children by operation of law;
- no other circumstances exist whereby there is a guardian, or whereby another person
 has rights and responsibilities equivalent to guardianship over the said children, or has
 parental responsibility in relation to the said children.

I make this Declaration from facts within my own knowledge save where otherwise appears.

Sworn and declared by the below named

Seachadadh Seirbhísí Inimirce, An Roinn Dlí agus Cirt 13/14 Cé an Bhúrcaigh, Baile Átha Cliath 2, D02 XK70 *Immigration Service Delivery, Department of Justice 13-14 Burgh Quay Dublin 2, D02 XK70*

On this

day of





in the County of before me							
(Please choose from the following and tick/complete as appropriate)							
Who is personally known to me.							
Who is identified to me by who is personally known to me.							
Whose identity has been established to me before the taking of this Declaration by the							
production to me of passport number issued on// by the							
authorities of, which is an authority recognised by the Irish Government.							
Whose identity has been established to me before the taking of this Declaration by the production to me of national identity card number issued on//							
by the authorities of which is an EU Member State, the Swiss							
Confederation or a Contracting Party to the EEA Agreement (delete as appropriate).							
Whose identity has been established to me before the taking of this Declaration by the							
production to me of Aliens Passport number (document equivalent to a passport)							
issued on// by the authorities of which is a	ın						
authority recognised by the Irish Government.							





Whose identity has been e	established to me before the taking o	of this Declaration by the
production to me of refugee	e travel document number	issued on
// by the M		
		L
Whose identity has been a	established to me before the taking o	of this Doclaration by the
	established to me before the taking of	-
	document number (other than refuge	Γ
issued	d on// by the Mini	ister for Justice.
Signature of Deponent		
Signature of Person Admir	istering Oath/Declaration	
Telephone Number		
,		
	OFFICIAL STAMP OR SEAL	
	S. F. O., LE STAININ STATE	

Seachadadh Seirbhísí Inimirce, An Roinn Dlí agus Cirt 13/14 Cé an Bhúrcaigh, Baile Átha Cliath 2, D02 XK70 Immigration Service Delivery, Department of Justice 13-14 Burgh Quay Dublin 2, D02 XK70

