**SPECIAL POWER OF ATTORNEY**

# KNOW ALL MEN BY THESE PRESENTS:

That I/We\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ citizenship of legal age/s, and resident/s of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Address in Ireland)

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

(Address in Ireland)

with telephone no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , do hereby name, constitute, and appoint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , Filipino, of legal age, and a resident \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(name to appoint)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Address in the Philippines)

to be our/my true and lawful ATTORNEY-IN-FACT, for us/me and in our/my name, place, and stead, to do and perform the following acts, deeds and things, to wit:

1. To submit, file, process, facilitate, receive, or cause the application for Philippine Passport with the Department of Foreign Affairs for our/my minor child/children;

Name of the Child/Children

 1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. To obtain the necessary clearance from the Department of Social Welfare and Development (DSWD);
2. To sign, all papers, documents and other instruments that may be necessary or required for processing of the abovementioned documents.

**HEREBY GIVING AND GRANTING unto our/my said ATTORNEY-IN-FACT,** full power and authority to do and perform all and every act that may be necessary or requisite relative to the above, as to all intents and purposes as we/I might or could do if personally present and acting in person, hereby ratifying and confirming all that our/my said ATTORNEY-IN-FACT shall lawfully do or cause to be done in and about the above matter by virtue of these presents.

IN WITNESS WHEREOF, I/we hereunto set my/our hands this \_\_\_\_\_\_ day of\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ at the Philippine Consulate Dublin, Ireland.

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

 **Father Mother**

(Print Name with Signature above) (Print Name with Signature above)

signed in the presence of:

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

 **Witness Witness**

 (Print Name with Signature above) (Print Name with Signature above)