

DATE: _____

To whom it may concern,

I am /We are _____ and
_____ the parents of _____ (*minor/s
name*) residing at _____. I/We
acknowledge and have given my/our permission on the said minor/s traveling
unaccompanied/alone in _____ (*country*) on
_____ (*date of travel*) for the purpose of
_____.

I/We assume full responsibility over the minor's safety and welfare during the
entire duration of travel and stay at _____
(*Place where minor intends to stay*) and releasing DSWD Field Office MIMAROPA
from any liability/responsibility in case of untoward incident during the travel of the
child/ren.

Thank you for your consideration.

(Name and Signature of Father)

(Name and Signature of Mother)