



home affairs

Department:  
Home Affairs  
REPUBLIC OF SOUTH AFRICA

**SUGGESTED FORMAT: PARENTAL CONSENT AFFIDAVIT  
(CONSENT FOR PERSON UNDER THE AGE OF 18 TO TRAVEL TO OR FROM THE REPUBLIC)**

I/We\* hereby declare my/our consent that my/our daughter/son whose Unabridged Birth Certificate (UBC) or  
\*\*Equivalent Document is attached may travel to and from South Africa:

Surname: \_\_\_\_\_ Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Identified by Passport No. \_\_\_\_\_ is travelling from \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_ 20\*\*\*\*

and/or\*\* is a student/cared for at \_\_\_\_\_  
situated at (address) \_\_\_\_\_

\_\_\_\_\_. Contact number of learning institution/place of care: \_\_\_\_\_

The child is accompanied / will be received in South Africa by (delete appropriately):

Surname, Name		
Relationship		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence

Attach copy of South African ID or if a foreign national attach passport and visa of person receiving the child in SA.

**Mother:**

Surname, Name		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence
Signature and date		

Attach copy of mother's ID or passport.

**Father:**

Surname, Name		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence
Signature and date		

Attach copy of father's ID or passport.

**Legal Guardian:**

Surname, Name		
Residential Address		
Work Address		
Contact No: Work	Mobile	Residence
Signature and date		

Attach legal guardian's appointment letter or court order and ID or passport.

**Copies of the following documents are attached:**

- ☐ Unabridged Birth Certificate (UBC) or Equivalent Document of child travelling
- ☐ ID or Passport and Visa of person receiving child in the Republic
- ☐ Court Order (where applicable)
- ☐ Death Certificate (of any deceased parent reflected on the UBC or Equivalent Document)
- ☐ ID or Passport of parent(s) or legal guardian(s)

Thus signed and \*\*sworn/solemnly affirmed before me on this ..... day of ..... 20.....

.....  
**Commissioner of Oaths**

(May be attested free of charge at any embassy/mission of the Republic of South Africa)

**First name(s):** .....

**Surname:** .....

**Capacity:** .....

**Place:** Embassy of the Republic of South Africa, Seoul, Republic of Korea

**Contact Number:** +82-2-2077-5900

OFFICE STAMP

*\*Both parents whose details appear on the UBC or Equivalent Document shall consent to the child's travel. Where only one parent's details appear, only such parent's consent is required.*

*\*\*Delete whichever is not applicable.*

*\*\*\*An Equivalent Document is any official document or letter issued by a foreign government (including a foreign embassy) or a letter issued by the Director-General of the Department of Home Affairs in lieu of an unabridged birth certificate and which serves as a confirmation of parentage of a person below the age of 18.*

*\*\*\*\*This document remains valid only for the period stipulated, which may not exceed six (6) months.*