This form must be typed. See DoD 1000.21-R for form completion instructions.

AUTHORIZATION TO APPLY FOR A "NO-FEE" PASSPORT AND/OR REQUEST FOR VISA

1. DATE PASSPORT OR VISA REQUIRED BY APPLICANT
10 Days prior to Estimated Departure Date (blk 14)

2. MAJOR SERVICE COMPONENT
State: **USAF, USAFR, USAF ANG**

3. APPLICANT'S LAST NAME - FIRST NAME - MIDDLE NAME
Enter Full Last - First - Middle Name As Shown on DSP-11, 82, or 19

4. APPLICANT'S DATE OF BIRTH
DD/MMM/YY

5. APPLICANT'S PLACE OF BIRTH
Enter State or Country If Outside US

6. SPONSOR'S LAST NAME - FIRST NAME - MIDDLE NAME
Enter "X" In Box, only if DOD Civilian or Active Duty Military
☐ *(If same as Item 3, X Block)*

7. SPONSOR'S MILITARY RANK/CIVILIAN GRADE
e.g., SSGT/E-5

8. SPONSOR'S SSN
Verify SSN Matches DSP-11 or 82

9.a. APPLICANT'S CURRENT HOME ADDRESS *(Include ZIP Code)*
May Enter Unit Address in lieu of Applicant's Current Home Address

b. HOME TELEPHONE NUMBER *(Include area code)*
Enter Home Phone #

c. OFFICE TELEPHONE NUMBER *(Include area code/DSN)*
Enter Work Phone #

10.a. INTERIM ADDRESS WHERE APPLICANT MAY BE CONTACTED AFTER DEPARTING LOCATION INDICATED IN ITEM 9 *(Include ZIP Code)*
Enter Unit/Base Passport Agent's or Applicant's Leave Address

b. NAME OF PERSON WITH WHOM RESIDING
Leave Blank

c. TELEPHONE *(Incl. area code)*
To where applicant is at in 10a

d. AGENT ID CODE *(If applicable)*
Unit/Base Passport Agent's ID & DSN

11. DESTINATION *(Country or Countries)*
State Non-NATO Country Requiring Applicant To Have A Passport

12. SPECIAL ASSIGNMENT REQUIRING PASSPORT* *(See Note)*
N/A

13. PASSPORT WILL BE FORWARDED TO: *(Include complete mailing address, building number, room number, ZIP Code, and telephone number/DSN)*
Enter either the Passport Agent's Complete mailing address or the address of the applicant. (If applicant's address it must be highlighted. To be used only in emergency situations.)

14. ESTIMATED DATE OF DEPARTURE *(From country in which applicant is currently residing)*
10 Days after Block 1

15. PROPOSED LENGTH OF STAY
# of Days/Months

16. AUTHORIZING OFFICIAL

a. NAME *(Last, First, Middle Initial)*
Full Name Of Unit's Authorizing Official

b. GRADE

c. TITLE

d. COMPLETE MAILING ADDRESS *(Include ZIP Code)*
Enter Unit Authorizing Official's Complete Address

e. TELEPHONE NUMBER *(Include area code/DSN)*
Unit Authorizing Official's DSN

f. SIGNATURE OF AUTHORIZING OFFICIAL
Sign One 1056; Make Three Additional Copies; Staple 1056 With Original Signature To The Back Of the Application

g. DATE
DD/MMM/YY

17. ADDITIONAL INFORMATION *(Attach continuation sheets if necessary)*
State: **Passport only - Visa will be obtained at a later date(if required), Passport & Visa, Visa Not Required, or Visa Only**.
Provide Exact Purpose: **List what the sponsor/applicant's job is. (NOTE: PCS, TDY, or Official Business is not sufficient.)**
If DSP-19 Submitted for Passport Changes Or For Other Actions State: **type of change (e.g., name), add 24 additional visa pages (to 24 page passport only), or 2 year extention of 2 year passport**

FOR USE BY ISSUING OR RECEIVING AGENT *(Suspense Control)*

18. DATE APPLIED FOR PASSPORT	19. PLACE APPLIED FOR PASSPORT	20. NAME OF COURT OR PASSPORT AGENT	
21. DATE PASSPORT RECEIVED FROM DEPARTMENT OF STATE	22. PASSPORT NUMBER	23. DATE OF PASSPORT ISSUE	24. PASSPORT EXPIRATION DATE
25. DOCUMENT(S) INCLUDED WITH PASSPORT	26. COUNTRY AND DATE VISA REQUESTED	27. DATE PASSPORT RECEIVED WITH VISA	28. DATE PASSPORT MAILED

PRIVACY ACT STATEMENT

AUTHORITY: Sections 3012, 8012, 5031, Title 10 USC; 22 CFR 51.63; EO 9397.

PRINCIPAL PURPOSE: To provide authority for issue of "No-Fee" passport and/or request for a visa which is an endorsement stamped or written on a passport, showing that it has been examined by the proper officials of a country and granting entry into that country. The Social Security Number is required to verify and/or identify the applicant.

ROUTINE USES: Information is used in conjunction with application for passport/visa and foreign travel. Information may be released to other DoD agencies, various activities within the Department of State, foreign embassies and consulates.

DISCLOSURE: Voluntary; however, if applicant does not provide information, a "No-Fee" passport cannot be authorized.

***NOTE:** If assignment is to Attache; MAAG; JUSMMAT; Security Assistance Liaison Office (SALO); DSP or other Special Advisory Group, e.g., CENTO; or any particular assignment that will govern type and need for a passport, enter such information. If not, enter "Not Applicable."