

DMV (LOGO HERE)
REAL ID EXCEPTION PROCESS
APPLICATION FORM

SECTION 1 – YOUR INFORMATION AND CERTIFICATION OF ELIGIBILITY

YOUR TRUE FULL NAME (AS IT APPEARS ON YOUR DRIVER LICENSE / IDENTIFICATION CARD APPLICATION)	YOUR DRIVER LICENSE/ IDENTIFICATION CARD NUMBER
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I am a United States (U.S.) citizen and am unable to produce a valid, unexpired U.S. passport or passport card, a certified copy of a U.S. birth certificate, a U.S. Certificate of Birth Abroad, a Certificate of Naturalization, or a Certificate of Citizenship.

NOTE: Your application will be denied if the reason you cannot produce your U.S. citizenship document is because it has been lost, damaged, or destroyed but is still available from the issuing state or federal agency.

I qualify for an exception to the REAL ID U.S. citizenship documentation requirement through no fault of my own because I (*check all that apply*):

- Was born before 1935,
- Am mentally disabled,
- Was abandoned as a child,
- Am a ward of the court,
- Am homeless, and/or
- Cannot obtain the documents from state or federal agencies (i.e. due to destruction by a natural disaster).

PLEASE BRIEFLY EXPLAIN WHY YOU ARE UNABLE TO PRODUCE ONE OF THE REQUIRED CITIZENSHIP DOCUMENTS:

SECTION 2 – ADDITIONAL INFORMATION (IF UNKNOWN, WRITE “UNKNOWN”)

LIST ANY OTHER NAMES YOU HAVE USED (NICKNAMES, MAIDEN NAME, FORMER NAME IF LEGALLY CHANGED)

YOUR PLACE OF BIRTH (CITY AND STATE)		YOUR DATE OF BIRTH
BIOLOGICAL MOTHER'S NAME	BIOLOGICAL MOTHER'S PLACE OF BIRTH (CITY/STATE)	BIOLOGICAL MOTHER'S DATE OF BIRTH
BIOLOGICAL FATHER'S NAME	BIOLOGICAL FATHER'S PLACE OF BIRTH (CITY/STATE)	BIOLOGICAL FATHER'S DATE OF BIRTH
OTHER INFORMATION THAT MAY ASSIST THE DEPARTMENT IN DETERMINING ELIGIBILITY (OPTIONAL)		

SECTION 3 – SIGNATURE AND CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I understand I may be required to provide additional information to qualify.

SIGNATURE X	DATE	DAYTIME TELEPHONE NO. ()
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FOR DMV USE ONLY

FO Use:		INV Use:	
DATELINE STAMP	SSN VERIFIED <input type="checkbox"/>	DATE RECEIVED	ACTION
	RESIDENCE VERIFIED <input type="checkbox"/>		