



OFFICE OF THE SECRETARY OF STATE  
DRIVER SERVICES DEPARTMENT

DRIVER SERVICES — FIELD HEADQUARTERS  
2701 S. DIRKSEN PKWY.  
SPRINGFIELD, IL 62723  
217-785-3108  
www.cyberdriveillinois.com

**AFFIDAVIT OF IDENTITY**

This affidavit must be completed if a minor cannot independently complete the application process for a state ID card. This verification is necessary in order for the parent, legal guardian, or responsible adult to act on behalf of the minor in completing the application process. The parent, legal guardian, or responsible adult still must provide acceptable forms of identification on behalf of the minor as required by the Acceptable Identification Chart for issuance of a state ID card for the minor. The affidavit must be completed only to establish and verify the relationship to the minor. This affidavit may not be used for any other purpose. The parent, legal guardian or responsible adult must verify their identity by taking the following steps:

- Accompany the minor applicant to the Driver Services facility.
- Complete the Affidavit of Identity in the presence of a Secretary of State Driver Services employee.
- Present proof of identity by presenting a valid Illinois driver's license or state ID card, or by meeting the proof of identity requirements on the Acceptable Identification Chart.
- **IMPORTANT:** This form must be signed in the presence of a Secretary of State Driver Services employee.

**AFFIRMATION:**

I, \_\_\_\_\_, affirm that I am the parent, legal guardian, or responsible adult of \_\_\_\_\_, whose date of birth is \_\_\_\_\_

and who resides at \_\_\_\_\_, \_\_\_\_\_ IL \_\_\_\_\_,  
Street Address, Apt. Number City ZIP

and I have the legal capacity to act on behalf of the minor to complete the application process for issuance of a state ID card for the minor.

**Under penalties of perjury, I swear or affirm that all information submitted by me in this affidavit is true, and that no fictitious documents have been presented for the purpose of the affidavit.**

Parent, Legal Guardian, or Responsible Adult Signature: \_\_\_\_\_

Parent, Legal Guardian, or Responsible Adult Print Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Parent, Legal Guardian, or Responsible Adult Address: \_\_\_\_\_

Parent, Legal Guardian, or Responsible Adult Driver's License or State ID Card Number: \_\_\_\_\_

Date: \_\_\_\_\_

The Parent, Legal Guardian, or Responsible Adult's Identity document(s) presented:

Birth Certificate     Driver's License     State ID Card     Passport

Other: \_\_\_\_\_

Signature of Secretary of State Representative: \_\_\_\_\_

Driver Services Facility Name and Number: \_\_\_\_\_

Date: \_\_\_\_\_