RENEWAL REGULAR PASSPORT APPLICATION FORM (Adult)

Site: XXXXXXX

DEPARTMENT OF FOREIGN AFFAIRS

THIS FORM IS NOT FOR SALE

Office of Consular Affairs Last Revision: 07 October 2017

INSTRUCTIONS: Please PRINT entries legibly using black or blue ink only. Supply the necessary information and indicate "**N/A**" for entries with no answers. Tick (**V**) boxes as appropriate.

Date/Time: Day, DDMon YYYY/0000HR Booking Reference no.:0123456789101112

entries with no answers. Tick (v) boxes as appropriate.							
CAPTURE SITE PRE-I	PROCESSING (Do not write on this part)						
APPOINTMENT VERIFIC	ATION:	REMARKS:					
PASSPORT APPLICANT'S INFORMATION							
1.LAST NAME							
2. FIRST NAME							
3. MIDDLE NAME or MAIDEN LAST NAME							
4. SEX	5. DATE OF BIRTH (ex. 01 Jan 2017)	6. PLACE OF BIRTH					
☐ MALE		(For born in the PHL: Municipality/City & Province					
FEMALE	D D M M M Y Y Y Y	For born outside the PHL: Country)					
7. CIVIL STATUS	8a.HOW DID YOU ACQUIRE PHL	8b. DID YOU EVER LOSE YOUR PH CITIZENSHIP?					
SINGLE	CITIZENSHIP?	YES NO 8c.ARE YOU CURRENTLY A CITIZEN OF ANOTHER					
MARRIED	☐ BY BIRTH	COUNTRY? YES NO					
☐ WIDOW/ER	☐ BY NATURALIZATION	8d.IF YES, FROM WHAT COUNTRY?					
☐ NULLIFIED /	☐ BY RE-ACQUISITION (RA no. 9225)	8e. HAVE YOU SERVED IN ANY FOREIGN					
ANNULLED	☐ BY ELECTION	MILITARY? YES NO IF Yes, what country?					
☐ DIVORCED							
	☐ BY LEGISLATION						
APPLICANT'S CONTACT INFORMATION							
9a. PRESENT ADDRESS:							
9b. HOME ADDRESS:							
10. WHERE DO YOU WISH YOUR PASSPORT TO BE DELIVERED? ☐ PRESENT ADDRESS ☐ HOME ADDRESS							
11. TELEPHONE/MC							
12. e-MAIL ADDRESS:							

13. APPLICANT'S SPOUSE'S NAME:							
14a. PERSON TO CONTACT IN CASE O	F EMERGENCY:		14b. TEL/MOBILE NO. OF PERSON TO NOTIFY:				
PARENTAL IN	NFORMATION			CURRENT PASSPORT DETAILS			
15.FATHER'S DETAILS	16. MOTHER'S	MAIDEN	DETAILS	17a. PASSPOR	RT NUMBER		
Last Name:	Last Name:				!		
First Name:	First Name:	First Name:		17b. DATE OF	ISSUE		
1					ļ		
Middle Name:	Middle Name:			17c.DATE OF EXPIRY			
· · · · · · · · · · · · · · · · · · ·			T/C.DATE OF E				
Citizenship (at time of applicant's birth)	Citizenship (at ti	ime of applic	me of applicant's birth)		AUTHORITY		
		(ac come of approant o commy		1,0	No money		
STATUS OF CURRENT PASSPORT							
19. Please choose as applicable:			Lost Valid Passport				
Passport Intact	ļ		Affidavit of Loss				
Damaged Passport	ļ		 Police Report in English 				
Affidavit of Explanation	ļ	Lost Expired Passport					
	ı		Affidavit of Explanation				
	DECLARATION	N OF APP	LICANTS				
I HEREBY DECLARE AND AFFIRM that 1) I am a Filipino citizen. 2) The information provided in this application is true and correct. 3) The supporting documents attached are authentic. 4) I consent to the verification by the Philippine Government of the information I provided to establish my personal particulars, and further consent to its use for any lawful purpose. 5) I am aware that the information provided in this application will be treated in accordance with relevant privacy regulations. 6) I am aware that under the law, I am allowed to hold only one valid regular Philippine passport at a given time. 7) I am aware that making false statements in this passport application and furnishing falsified or forged documents are punishable by fine or imprisonment, and grounds for suspension or denial of application. 8) I understand and accept that the release of the passport could be subject to delay due to unforeseen events beyond the control of the Department of Foreign Affairs. 21. DATE (ex. 01 Jan 2017)							
DO NOT WRITE BI	DO NOT WRITE BELOW THIS LINE. FOR THE DEPARTMENT'S USE ONLY.						
REMARKS:		PASSPOR VERIFICA	RT WATCHLIS	Γ	RETURNED CANCELLED PASSPORT SIGNATURE OF APPLICANT:		
PROCESSOR'S SIGNATURE:	ENCODE	ENCODER'S SIGNATURE:					
OFFICIAL RECEIPT/PAYMENT SLIP NO:	:	DATE OF	DATE OF TRANSACTION:				

END