



**REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FOREIGN AFFAIRS
PHILIPPINE CONSULATE GENERAL
NEW YORK**



APPLICATION FOR PHILIPPINE TRAVEL DOCUMENT

PLEASE PROVIDE REQUIRED INFORMATION COMPLETELY AND PRINT LEGIBLY.

GIVEN NAME/S		_____	
MIDDLE NAME		_____	
LAST NAME		_____	
DATE OF BIRTH (MONTH / DAY / YEAR)	SEX	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE
PLACE OF BIRTH	AGE	_____	
CIVIL STATUS	OCCUPATION		
<input type="checkbox"/> SINGLE	<input type="checkbox"/> MARRIED	<input type="checkbox"/> WIDOWER	_____
DISTINGUISHING MARK, IF ANY:			

2" x 2" PHOTO

FOUR (4) PIECES

COLORED, PLAIN WHITE
BACKGROUND, TAKEN
WITHIN LAST SIX MONTHS

NAME OF SPOUSE, IF MARRIED	CITIZENSHIP OF SPOUSE
_____	_____
IF WIDOWED OR DIVORCED, NAME OF PREVIOUS SPOUSE	CITIZENSHIP OF PREVIOUS SPOUSE
_____	_____
NAME OF FATHER (FIRST NAME, LAST NAME)	CITIZENSHIP (AT TIME OF APPLICANT'S BIRTH)
_____	_____
MAIDEN NAME OF MOTHER (FIRST NAME, LAST NAME)	CITIZENSHIP (AT TIME OF APPLICANT'S BIRTH)
_____	_____

US ADDRESS	PHONE NO. / MOBILE NO.:
_____	_____
PHILIPPINE ADDRESS	E-MAIL:
_____	_____

PHILIPPINE CITIZENSHIP ACQUIRED BY:	HAVE YOU EVER BEEN ISSUED A PHILIPPINE PASSPORT?
<input type="checkbox"/> BIRTH	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> NATURALIZATION	IF YES, LATEST PASSPORT NO.
<input type="checkbox"/> ELECTION	_____
<input type="checkbox"/> R.A. 9225 (DUAL CITIZENSHIP LAW)	DATE OF ISSUE
<input type="checkbox"/> OTHER: _____	PLACE OF ISSUE

REASON FOR APPLYING A TRAVEL DOCUMENT:

I SOLEMNLY SWEAR that the attached photograph is mine, that the statements made on this application form are true and that the attached supporting documents are authentic.

SIGNATURE OF APPLICANT

IMPORTANT: IF APPLICANT IS UNABLE TO APPLY IN PERSON, THIS FORM SHALL BE NOTARIZED.

SUBSCRIBED AND SWORN to before me this ____ day of _____ 20____ in _____

NOTARY PUBLIC

SEAL OF NOTARY PUBLIC