

DEPARTMENT OF FOREIGN AFFAIRS

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 (✓) boxes as appropriate.

Site: New York PCG

Date/Time: Day, DD Mon YYYY/0000HR

Booking Reference No.

CURRENT PASSPORT DETAILS					
PASSPORT NUMBER:			ISSUING AUTHORITY:		
DATE OF ISSUE:			DATE OF EXPIRY:		
PASSPORT APPLICANT'S INFORMATION					
1. LAST NAME <div></div>					
2. FIRST NAME <div></div>					
3. MIDDLE NAME or MAIDEN LAST NAME <div></div>					
4. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		5. DATE OF BIRTH (<i>ex. 01 Jan 2017</i>) <div></div> <div>D D M M M Y Y</div>		6. PLACE OF BIRTH (For born in PHL: Municipality/City & Province For born outside PHL: Country) <div></div>	
7. CIVIL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOW/ER <input type="checkbox"/> NULLIFIED / ANNULLED <input type="checkbox"/> DIVORCED (<i>with recognition by PHL Court</i>)		8a. HOW DID YOU ACQUIRE PHL CITIZENSHIP? <input type="checkbox"/> BY BIRTH <input type="checkbox"/> BY NATURALIZATION <input type="checkbox"/> BY RE-ACQUISITION (RA No. 9225) <input type="checkbox"/> BY ELECTION <input type="checkbox"/> BY LEGISLATION		8b. DID YOU EVER LOSE YOUR PHL CITIZENSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO 8c. ARE YOU CURRENTLY A CITIZEN OF ANOTHER COUNTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO 8d. IF YES, FROM WHAT COUNTRY? <div></div> 8e. HAVE YOU SERVED IN ANY FOREIGN MILITARY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF Yes, what country? <div></div>	
9a. APPLICANT'S SPOUSE'S NAME:		9b. SPOUSE'S CITIZENSHIP			
APPLICANT'S CONTACT INFORMATION					
10a. PRESENT ADDRESS: <div></div>					
10b. PHILIPPINE ADDRESS: <div></div>					
11. HOW DO YOU WISH TO RECEIVE YOUR PASSPORT? <input type="checkbox"/> PICK-UP <input type="checkbox"/> BY MAIL (Pls. Provide Xpress Post Env.)					
12. TELEPHONE/MOBILE NUMBER: <div></div>					
13. e-MAIL ADDRESS: <div></div>					
OFFICIAL RECEIPT/PAYMENT SLIP NO.:			DATE OF TRANSACTION:		

PARENTAL INFORMATION				
14. FATHER'S DETAILS		15. MOTHER'S DETAILS (MAIDEN /SINGLE NAME)		
Last Name:		Last Name:		
First Name:		First Name:		
Middle Name:		Middle Name:		
Citizenship (at time of applicant's birth)		Citizenship (at time of applicant's birth)		
16a. PERSON TO CONTACT IN CASE OF EMERGENCY:		16b. TEL/MOBILE NO. OF PERSON TO NOTIFY:		
STATUS OF CURRENT PASSPORT				
Please choose as applicable: <input type="checkbox"/> Passport Intact <input type="checkbox"/> Damaged Passport <ul style="list-style-type: none"> Affidavit of Explanation 		<input type="checkbox"/> Lost Valid Passport <ul style="list-style-type: none"> Affidavit of Loss Police Report in English <input type="checkbox"/> Lost Expired Passport <ul style="list-style-type: none"> Affidavit of Explanation 		
WAIVER OF LIABILITY				
<p>I waive any & all claims that may now and in the future have against, & the release & hold free from any responsibility or liability & agree not to sue the Philippine Consulate in New York or any of its officers & staff or its agents/representatives for any personal injury, expense, loss or damage that I may suffer or sustain as a result or by reason of the mailing of my passport/documents using the services of US Post or courier.</p> <p style="text-align: center;">Mail Tracking No: _____</p>				
DECLARATION OF APPLICANT				
<p>I HEREBY DECLARE AND AFFIRM that 1) I am a Filipino Citizen. 2) The information I provided in this application are 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 issue 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 the release of the passport could be subject to delay due to unforeseen events beyond the control of the Department of Foreign Affairs.</p>				
17. SIGNATURE OVER PRINTED NAME			18. DATE (ex. 01 Jan 2017)	
PROCESSOR'S SIGNATURE:	WATCHLIST VERIFICATION:	SIGNATURE OF APPLICANT/REPRESENTATIVE TO RECEIVE:		
		PASSPORT	CANCELLED PASSPORT	NEW PASSPORT
REMARKS:		SIGNATURE		
		ENCODER:	SIGNING OFFICER:	

END