

RENEWAL REGULAR PASSPORT APPLICATION FORM (Adult)

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.

Site: **XXXXXXXX**
 Date/Time: Day, DD Mon YYYY/0000HR
 Booking Reference no.: 0123456789101112

CAPTURE SITE PRE-PROCESSING (Do not write on this part)

APPOINTMENT VERIFICATION:

REMARKS:

PASSPORT APPLICANT’S INFORMATION

1. LAST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. FIRST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. MIDDLE NAME or MAIDEN LAST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. SEX

- MALE
 FEMALE

5. DATE OF BIRTH (ex. 01 Jan 2017)

□□	□□□□	□□□□	□□□□
DD	MM	YY	YY

6. PLACE OF BIRTH

(For born in the PHL: Municipality/City & Province
 For born outside the PHL: Country)

7. CIVIL STATUS

- SINGLE
 MARRIED
 WIDOW/ER
 NULLIFIED / ANNULLED
 DIVORCED

8a. HOW DID YOU ACQUIRE PHL CITIZENSHIP?

- BY BIRTH
 BY NATURALIZATION
 BY RE-ACQUISITION (RA no. 9225)
 BY ELECTION
 BY LEGISLATION

8b. DID YOU EVER LOSE YOUR PH CITIZENSHIP?

- YES NO

8c. ARE YOU CURRENTLY A CITIZEN OF ANOTHER COUNTRY? YES NO

8d. IF YES, FROM WHAT COUNTRY?

8e. HAVE YOU SERVED IN ANY FOREIGN MILITARY? YES NO

IF Yes, what country?

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/MOBILE NUMBER:

12. e-MAIL ADDRESS:

13. APPLICANT'S SPOUSE'S NAME:		
14a. PERSON TO CONTACT IN CASE OF EMERGENCY:		14b. TEL/MOBILE NO. OF PERSON TO NOTIFY:
PARENTAL INFORMATION		CURRENT PASSPORT DETAILS
15. FATHER'S DETAILS Last Name:	16. MOTHER'S DETAILS Last Name:	17a. PASSPORT NUMBER
First Name:	First Name:	17b. DATE OF ISSUE
Middle Name:	Middle Name:	17c. DATE OF EXPIRY
Citizenship <i>(at time of applicant's birth)</i>	Citizenship <i>(at time of applicant's birth)</i>	17d. ISSUING AUTHORITY
STATUS OF CURRENT PASSPORT		
19. Please choose as applicable:		
<input type="checkbox"/> Passport Intact	<input type="checkbox"/> Lost Valid Passport <ul style="list-style-type: none"> Affidavit of Loss Police Report in English 	
<input type="checkbox"/> Damaged Passport <ul style="list-style-type: none"> Affidavit of Explanation 		<input type="checkbox"/> Lost Expired Passport <ul style="list-style-type: none"> Affidavit of Explanation
DECLARATION OF APPLICANTS		
<p>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.</p>		
<hr/> 20. SIGNATURE OVER PRINTED NAME		<hr/> 21. DATE (ex. 01 Jan 2017)
DO NOT WRITE BELOW THIS LINE. FOR THE DEPARTMENT'S USE ONLY.		
REMARKS:	PASSPORT WATCHLIST VERIFICATION:	RETURNED CANCELLED PASSPORT SIGNATURE OF APPLICANT:
PROCESSOR'S SIGNATURE:	ENCODER'S SIGNATURE:	
OFFICIAL RECEIPT/PAYMENT SLIP NO:	DATE OF TRANSACTION:	

END