

Republic of the Philippines
DEPARTMENT OF FOREIGN AFFAIRS

PASSPORT APPLICATION FORM

*THIS APPLICATION FORM IS NOT FOR SALE. PLEASE DO NOT LEAVE ANY SPACES BLANK, INDICATE N/A IF NOT APPLICABLE.
PROVIDING FALSE STATEMENTS IN PASSPORT APPLICATIONS IS PUNISHABLE BY LAW (R.A. 8239).*

_____ LAST NAME / APELYIDO	_____ FIRST NAME / PANGALAN (JR. / II / III)
_____ MIDDLE NAME / GITNANG PANGALAN	_____ PLACE OF BIRTH / POOK NG KAPANGANAKAN
_____ / _____ / _____ <small style="display: flex; justify-content: space-around; font-size: 0.8em;"> Month Day Year </small> DATE OF BIRTH / PETA NG KAPANGANAKAN (Ex. March 8, 2010)	GENDER / KASARIAN <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

Civil Status: Single Married Widower Legally Separated Annulled

Complete Address: _____ Tel. No.: _____

Present Occupation: _____ Mobile No.: _____

Work Address: _____ Tel. No.: _____

E-mail Address: _____

Name of Wife / Husband: _____ Citizenship: _____

Name of Father: _____ Citizenship: _____

Maiden / Single name of Mother: _____ Citizenship: _____

Citizenship Acquired By:

Birth Election Marriage Naturalization R.A. 9225 Others _____

Are you a holder of a foreign passport? Yes No
If Yes, from what country? _____

Have you ever been issued a Philippine Passport? Yes No
If Yes, latest Passport Number? _____
Date of issue: _____ Place of issue: _____

(For applicants below 18 years old ONLY)

Name of minor's travelling companion: _____

Companion's relationship: _____ Contact Number: _____

I SOLEMNLY SWEAR that 1) I am a Filipino citizen. 2) The information I provided in this application are true and correct. 3) The supporting documents are authentic. 4) I am aware that under the law, I am allowed to hold only one Philippine passport at any given time. 5) I am aware that making false statements in passport application, furnishing falsified or forged documents in support thereof are punishable by law.

Signature of Applicant or Legal Guardian (for minor applicants)

ORGAN DONATION (Optional)

In case of death, I hereby donate [] Any organ/tissue [] Specific organ _____ to save other people.

Please immediately notify my family at mobile/tel. no. _____

FOR USE OF THE DEPARTMENT OF FOREIGN AFFAIRS ONLY. PLEASE DO NOT WRITE BELOW THIS LINE.

REMARKS:

Processor: _____ Encoder: _____ Signing Officer: _____ Transmission Officer: _____

RECEIVED CANCELLED PASSPORT: _____

RECEIVED NEW PASSPORT: _____

FOR ADMINISTRATIVE USE ONLY: