

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: AMMAN PE
Date/Time:
Booking Reference No.:

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

APPOINTMENT VERIFICATION:	REMARKS:
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PASSPORT APPLICANT'S INFORMATION

1. LAST NAME

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2. FIRST NAME

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3. MIDDLE NAME or MAIDEN LAST NAME

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4. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	5. DATE OF BIRTH (ex. 01 Jan 2017) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">D</td> <td style="text-align: center;">D</td> <td style="text-align: center;">M</td> <td style="text-align: center;">M</td> <td style="text-align: center;">M</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> </table>											D	D	M	M	M	Y	Y	Y	Y	Y	6. PLACE OF BIRTH <small>(For born in the PHIL: Municipality & Province For born outside the PHL.: Country)</small> _____
D	D	M	M	M	Y	Y	Y	Y	Y													

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	8a. HOW DID YOU ACQUIRE PHL CITIZENSHIP? <input type="checkbox"/> BY BIRTH <input type="checkbox"/> BY NATURALIZATION <input type="checkbox"/> BY RE-ACQUISITION (RA 9225) <input type="checkbox"/> ELECTION <input type="checkbox"/> BY LEGISLATION	8b. DID YOU EVER LOSE YOUR PH 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? _____ 8e. HAVE YOU SERVED IN ANY FOREIGN MILITARY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF Yes, what country? _____
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APPLICANT'S CONTACT INFORMATION

9a. HOME ADDRESS:

9b. PRESENT ADDRESS:

10. TELEPHONE/MOBILE NUMBER:

11. e-MAIL ADDRESS:

12. APPLICANT'S SPOUSE'S NAME:		
13a. PERSON TO CONTACT IN CASE OF EMERGENCY: 13b. TEL/MOBILE NO.:		
PARENTAL INFORMATION		CURRENT PASSPORT DETAILS
14. FATHER'S DETAILS Last Name:	15. MOTHER'S DETAILS Last Name:	16. 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		
18. Please choose as applicable: <input type="checkbox"/> Passport Intact <input type="checkbox"/> Damaged Passport - Affidavit of Explanation		
<input type="checkbox"/> Lost Valid Passport - Affidavit of Loss - Police Report in English <input type="checkbox"/> Lost Expired Passport - Affidavit of Explanation		
DECLARATIONS 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 the making false statement in this passport application and furnishing falsified or forged documents are punishable by fine imprisonment and ground 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>		
_____ 19. SIGNATURE OVER PRINTED NAME		_____ 20. 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: