

**REPUBLIC OF THE PHILIPPINES**  
**DEPARTMENT OF FOREIGN AFFAIRS**  
**MANILA**  
**E-PASSPORT APPLICATION**

O.T

PLEASE PROVIDE CORRECT INFORMATION AND DO NOT LEAVE SPACES BLANK

LAST NAME / <i>APELYIDO</i>	MIDDLE NAME / <i>GITNANG PANGALAN</i>
FIRST NAME / <i>PANGALAN (JR. / II / III)</i>	PLACE OF BIRTH / <i>POOK NG KAPANGANAKAN</i>
DATE OF BIRTH ( <i>Ex. 01-DECEMBER-2000</i> )	GENDER / <i>KASARIAN</i> : <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
CIVIL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOW/ER <input type="checkbox"/> LEGALLY SEPARATED <input type="checkbox"/> ANNULLED	

NAME OF WIFE / HUSBAND: \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_  
FIRST NAME                      MIDDLE NAME                      LAST NAME

COMPLETE ADDRESS: \_\_\_\_\_ TEL. No.: \_\_\_\_\_

PRESENT OCCUPATION: \_\_\_\_\_ MOBILE No.: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ TEL. No.: \_\_\_\_\_

NAME OF FATHER: \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_  
FIRST NAME                      MIDDLE NAME                      LAST NAME

MAIDEN / SINGLE  
 NAME OF MOTHER: \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_  
FIRST NAME                      MIDDLE NAME                      LAST NAME

Citizenship Acquires By: <input type="checkbox"/> Birth <input type="checkbox"/> Election <input type="checkbox"/> Marriage <input type="checkbox"/> Naturalization <input type="checkbox"/> R.A 9225 <input type="checkbox"/> Others: _____	Purpose of Travel: <input type="checkbox"/> Tour <input type="checkbox"/> Seaman <input type="checkbox"/> Business <input type="checkbox"/> Migration <input type="checkbox"/> Study <input type="checkbox"/> Work <input type="checkbox"/> Others: _____
Are you holder of a foreign passport? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, from what country? _____	Have you ever been issued a Philippine Passport? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Latest Passport Number: _____ Date of issued: _____    Place of issue: _____
This serves as Affidavit of Support and Consent to Travel for Applicant below 18 years old ONLY  Name of minor's travelling Companion: _____ Companion Relationship: _____ Address / Contact Number: _____  <div style="text-align: right;">_____ Signature of Parent or Legal Guardian</div>	This serves as an Affidavit of Loss  Loss Passport Number: _____ Issued On: _____ Date Lost: _____ Lost due to: _____  <div style="text-align: right;">_____ Signature of Applicant</div>

*I SOLEMNLY SWEAR that 1) I am a Filipino citizen. 2) The information I provided in this application is true and correct. 3) The supporting documents attached are authentic. 4) I have not been issued a passport under any other name. 5) I am aware that under the law, I am allowed to hold only one Philippine passport at any given time. 6) 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

REMARKS:		
FOR STRICT COMPLIANCE: <i>Please print name affix initials.</i>		
Processor:	Encoder:	Signing Officer:
RECEIVED CANCELLED PASSPORT:	RECEIVED NEW PASSPORT:	