



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FOREIGN AFFAIRS

Post
APPLICATION FOR TRAVEL DOCUMENT

PLEASE PROVIDE CORRECT INFORMATION AND DO NOT LEAVE SPACES BLANK

LAST NAME _____

MIDDLE NAME _____

FIRST NAME _____

DATE OF BIRTH ____ / ____ / ____ GENDER MALE FEMALE
Day Month Year

PLACE OF BIRTH _____ AGE _____

CIVIL STATUS SINGLE MARRIED WIDOW/ER OCCUPATION _____

DISTINGUISHING MARK, IF ANY: _____

NAME OF SPOUSE, IF MARRIED _____

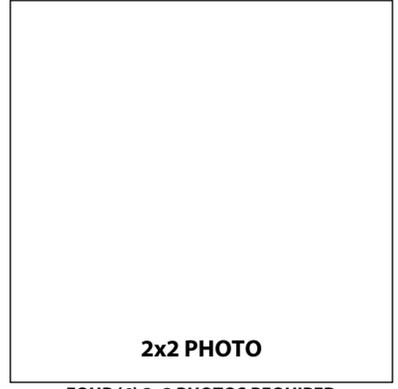
IF DIVORCED OR WIDOWED, NAME OF PREVIOUS SPOUSE _____

NAME OF FATHER _____

MAIDEN NAME OF MOTHER _____

U.S. ADDRESS _____

PHILIPPINE ADDRESS _____



2x2 PHOTO
FOUR (4) 2x2 PHOTOS REQUIRED

CITIZENSHIP _____

CITIZENSHIP _____

CITIZENSHIP _____

TELEPHONE NO. _____

- PHILIPPINE CITIZENSHIP ACQUIRED BY
- BIRTH
 - NATURALIZATION
 - R.A. 9225 (DUAL CITIZENSHIP LAW)
 - ELECTION
 - OTHERS _____

HAVE YOU EVER BEEN ISSUED A PHILIPPINE PASSPORT YES NO

IF YES, LATEST PASSPORT NUMBER _____

DATE OF ISSUE _____ PLACE OF ISSUE _____

REASON FOR APPLYING A TRAVEL DOCUMENT _____

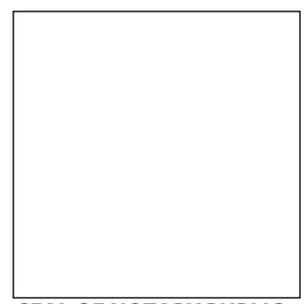
I SOLEMNLY SWEAR that the attached photograph is mine, that the statements made on this application form are true and that the attached supporting documents are authentic.

SIGNATURE OF APPLICANT _____

IMPORTANT: IF APPLICANT IS UNABLE TO APPLY IN PERSON, THIS FORM SHALL BE NOTARIZED.

SUBSCRIBED AND SWORN to before me this ____ day of _____, 20__ in _____.

NOTARY PUBLIC



SEAL OF NOTARY PUBLIC