## **REQUIREMENTS:**

- Printout of Confirmed Online Appointment
- Personal appearance of applicant
- Original passport
- Accomplished E-passport application form
- Photocopy of Passport Data page (2 copies)
- Visa page
- Other documents that may be required by the processor i.e., PSA/NSO BIRTH CERTIFICATE

## Form No. 2 – ENGLISH

## **RENEWAL REGULAR PASSPORT APPLICATION FORM (Adult)**

## DEPARTMENT OF FOREIGN AFFAIRS

| THIS FO | RM IS | NOT | FOR | SALE |  |
|---------|-------|-----|-----|------|--|
|---------|-------|-----|-----|------|--|

| Office | of | Consu | lar        | Affairs | Last | Revisio | n: 07 | October | 2017 |
|--------|----|-------|------------|---------|------|---------|-------|---------|------|
|        |    |       | <b>D</b> 1 |         |      |         |       |         |      |

**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: Date/Time: Booking Reference no.:

| CAPTURE SITE PRE-PROCESSING (Do not write on this part) |   |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| APPOINTMENT VERIFICA                                    | ATION:  | REMARKS:   |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   | PASSPORT APPLICANT'S INFO   | ORMATION   |  |  |  |  |  |
| 1.LAST NAME   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| 2. FIRST NAME   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| 3. MIDDLE NAME or                                       | MAIDEN LAST NAME  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| 4. SEX  | 5. DATE OF BIRTH (ex. 01 Jan 2017)  | 6. <b>PLACE OF BIRTH</b><br>(For born in the PHL: Municipality/City & Province   |  |  |  |  |  |
| FEMALE  | D D M M M Y Y Y Y   | For born outside the PHL: Country)   |  |  |  |  |  |
| 7. CIVIL STATUS<br>SINGLE<br>MARRIED<br>WIDOW/ER        | 8a.HOW DID YOU ACQUIRE PHL<br>CITIZENSHIP?<br>BY BIRTH<br>BY NATURALIZATION | 8b. DID YOU EVER LOSE YOUR PH CITIZENSHIP?         YES       NO         8c.ARE YOU CURRENTLY A CITIZEN OF ANOTHER         COUNTRY?       YES         8d.IF YES, FROM WHAT COUNTRY? |  |  |  |  |  |
| NULLIFIED /   | BY RE-ACQUISITION (RA no. 9225)   | 8e. HAVE YOU SERVED IN ANY FOREIGN<br>MILITARY? YES NO<br>IF Yes, what country?  |  |  |  |  |  |
|   | BY ELECTION     BY LEGISLATION  |  |  |  |  |  |  |
| APPLICANT'S CONTACT INFORMATION                         |   |  |  |  |  |  |  |
| 9a. PRESENT ADDRESS:                                    |   |  |  |  |  |  |  |
| 9b. HOME ADDRESS:                                       |   |  |  |  |  |  |  |
| 10. WHERE DO YOU WISH YOUR PASSPORT TO BE DELIVERED?    |   |  |  |  |  |  |  |
| 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  |  |                      | APPLICANT CURRENT PASSPORT DETAILS       |                       |  |  |
| 15.FATHER'S DETAILS   | 16. MOTHER'S DETAILS<br>(MAIDEN NAME)      |                      |  | 17a.PASSPORT NUMBER   |  |  |
| Last Name:  | Last Name:                                 |                      |  |                       |  |  |
|   |  |                      |  |                       |  |  |
| First Name:   | First Name:                                |                      |  | 17b.DATE OF ISSUE     |  |  |
| Middle Name:  | Middle Name:                               |                      |  | 17c.DATE OF EXPIRY    |  |  |
| <b>Citizenship</b> (at time of applicant's birth)   | Citizenship (at time of applicant's birth) |                      |  | 17d.ISSUING AUTHORITY |  |  |
| STATUS OF CURRENT PASSPORT  |  |                      |  |                       |  |  |
| 19. Please choose as applicable:  |  |                      | ost Valid Passport                       |                       |  |  |
| Passport Intact   | Passport Intact • Af                       |                      |  | idavit of Loss        |  |  |
| Damaged Passport  | d Passport • Poli                          |                      |  | ice Report in English |  |  |
| <ul> <li>Affidavit of Explanation</li> </ul>  |  | Lost                 | -  | ed Passport           |  |  |
|   |  |                      |  | idavit of Explanati   | on   |  |
|   | DECLARATION                                |                      |  |                       | ad in this smallestics is                                    |  |
| <b>I HEREBY DECLARE AND AFFIRM</b> 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. |  |                      |  |                       |  |  |
| 20. SIGNATURE OVER PRINTED I  | NAME                                       |                      |  | 21. DATE (ex. 01      | Jan 2017)  |  |
| DO NOT WRITE BELOW THIS LINE. FOR THE DEPARTMENT'S USE ONLY.  |  |                      |  |                       |  |  |
| REMARKS:  |  | PASSPOR<br>VERIFICA  |  | HLIST                 | RETURNED CANCELLED<br>PASSPORT<br>SIGNATURE OF<br>APPLICANT: |  |
| PROCESSOR'S SIGNATURE:  |  | ENCODER'S SIGNATURE: |  |                       |  |  |
| OFFICIAL RECEIPT/PAYMENT SLIP NO:   |  | DATE OF TRANSACTION: |  |                       |  |  |