

13. APPLICANT'S SPOUSE NAME:		
14a. PERSON TO CONTACT IN CASE OF EMERGENCY:		14b. TEL/MOBILE NO. OF PERSON TO NOTIFY:
PARENTAL INFORMATION		CURRENT PASSPORT DETAILS
15. FATHER'S DETAILS Last Name:	16. MOTHER'S DETAILS Last Name:	17a. PASSPORT NUMBER
First Name:	First Name:	17b. DATE OF ISSUE
Middle Name:	Middle Name:	17c. DATE OF EXPIRY
Citizenship (at the time of applicant's birth)	Citizenship (at the time of applicant's birth)	17d. ISSUING AUTHORITY:
STATUS OF CURRENT PASSPORT		
19. 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
DECLARATION 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 that 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.</p>		
20. SIGNATURE OVER PRINTED NAME		21. DATE (ex. 01 Jan 2018)
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:	