



DEPARTMENT OF FOREIGN AFFAIRS

Minors are those below eighteen (18) years of age or those over but unable to fully take care of themselves or protect themselves from abuse, neglect, cruelty, exploitation or discrimination because of physical or mental disability or condition (RA No. 7610).

Site: **VANCOUVER PCG**
 Appointment Time: _____

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.

CURRENT PASSPORT DETAILS

PASSPORT NUMBER: _____	ISSUING AUTHORITY: _____	
DATE OF ISSUE: _____	DATE OF EXPIRY: _____	
Please choose as applicable: <input type="checkbox"/> Passport Intact <input type="checkbox"/> Damaged Passport <ul style="list-style-type: none"> • Affidavit of Explanation 		<input type="checkbox"/> Lost Valid Passport <ul style="list-style-type: none"> • Affidavit of Loss • Police Report or File Number <input type="checkbox"/> Lost Expired Passport <ul style="list-style-type: none"> • Affidavit of Explanation

PASSPORT APPLICANT'S INFORMATION

1. LAST NAME

2. FIRST NAME

3. MIDDLE NAME or MAIDEN LAST NAME

4. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	5. DATE OF BIRTH (ex. 01 Jan 2018) <table style="width: 100%; text-align: center;"> <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> </tr> <tr> <td><i>D</i></td> <td><i>D</i></td> <td><i>M</i></td> <td><i>M</i></td> <td><i>M</i></td> <td><i>Y</i></td> <td><i>Y</i></td> <td></td> </tr> </table>									<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>		6. PLACE OF BIRTH (For born in PHL: Municipality/City & Province For born outside PHL: Country)
<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>												

7. PRESENT ADDRESS:

8. PHILIPPINE ADDRESS:

9. MOBILE PHONE OF PARENT/GUARDIAN: _____	10. WORK PHONE OF PARENT/GUARDIAN: _____
11. PERSONAL E-MAIL OF PARENT/GUARDIAN: _____	

PARENTAL INFORMATION

12. FATHER'S DETAILS Last Name: _____ First Name: _____ Middle Name: _____ Citizenship (at time of applicant's birth) _____	13. MOTHER'S DETAILS (MAIDEN /SINGLE NAME) Last Name: _____ First Name: _____ Middle Name: _____ Citizenship (at time of applicant's birth) _____
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OFFICIAL RECEIPT	SERVICE NUMBER	FEE PAID	DATE OF TRANSACTION:

APPLICANT'S OTHER INFORMATION

14. HOW DID THE APPLICANT ACQUIRE PHL CITIZENSHIP?

- BY BIRTH BY NATURALIZATION BY RECOGNITION BY DERIVATIVE CITIZENSHIP (RA No. 9225)

15. DISTINGUISHING MARKS ON FACE:

16. IS THE APPLICANT CURRENTLY SUBJECT OF AN ADOPTION PROCESS OR PARTIALLY/FULLY IN THE CARE OF AN ORPHANAGE? YES NO IF YES, PLEASE PROVIDE PERTINENT DOCUMENTS.

17. IS THERE ANY COURT ORDER OR LEGAL ARRANGEMENTS PERTAINING TO THE CHILD? YES, THERE IS. NONE THAT I KNOW OF IF YES, PLEASE PROVIDE PERTINENT DOCUMENTS.

DECLARATION OF PARENT OR LEGAL GUARDIAN OF THE APPLICANT

I HEREBY DECLARE AND AFFIRM that **1)** The minor applicant is a Filipino Citizen. **2)** I am the parent or legal guardian of the minor. **3)** The information provided in this application are true and correct. **4)** The supporting documents attached are authentic. **5)** I consent to the verification by the Philippine Government of the information I provided to establish the applicant's personal particulars, and further consent to issue its use for any lawful purpose. **6)** I am aware that the information provided in this application will be treated in accordance with relevant privacy regulations. **7)** I am aware that under the law, the applicant is only allowed to hold one valid regular Philippine passport at a given time. **8)** 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. **9)** I confirm that all original documents were returned to me. **10)** I understand and accept the release of the passport could be subject to delay due to unforeseen events beyond the control of the Department of Foreign Affairs. **11)** I understand that the Philippine Consulate General shall not be responsible for any loss, expense, or damage to my documents that may be sustained as a result or by reason of the mailing of my passport/documents using the services of Canada Post or my preferred courier. **12)** In case of "Return to Sender", I agree to reimburse the Consulate for the penalty and any expense incurred for the re-mailing.

19. SIGNATURE OVER PRINTED NAME OF PARENT OR LEGAL GUARDIAN

20. DATE (ex. 01 Jan 2018)

- PROOF OF CITIZENSHIP SUBMITTED**
- BIRTH CERTIFICATE from Philippine Statistics Authority
 - REPORT OF BIRTH from PHL Statistics Authority/PHL Embassy or Consulate
 - CERTIFICATE OF NATURALIZATION
 - IDENTIFICATION CERTIFICATE of CITIZENSHIP
 - Others: _____

TO PASSPORT APPLICANT:

For a list of the requirements relevant to your application, please visit the passport services section of the consulate's official website at:

<https://www.vancouverpcg.org/services/passport/>

PROCESSOR'S SIGNATURE:

WATCHLIST VERIFICATION:

Parent or Legal Guardian's Signature to receive:

BORROWED PASSPORT

CANCELLED PASSPORT

NEW PASSPORT

REMARKS:

SIGNATURE

ENCODER:

SIGNING OFFICER: