



Form No. 2 - ENGLISH  
REGULAR PASSPORT APPLICATION FORM (MINOR)

THIS FORM IS NOT FOR SALE

PHILIPPINE EMBASSY DILI

**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.

Site: XXXXXXXX  
Date/Time:  
Booking Reference no.:

**CAPTURE SITE PRE-PROCESSING (Do not write on this part)**

APPOINTMENT VERIFICATION: REMARKS:

**PASSPORT APPLICANT'S INFORMATION**

1. LAST NAME

2. FIRST NAME

3. MIDDLE NAME or MAIDEN LAST NAME

4. SEX  
 MALE  
 FEMALE

5. DATE OF BIRTH (ex. 01 Jan 2017)  
D D M M M Y Y Y Y

6. PLACE OF BIRTH  
(For born in PHL: Municipality/City & Province  
For born outside the PHL: Country

7a. HOW DID THE APPLICANT ACQUIRE PHL CITIZENSHIP?  
 BY BIRTH  BY NATURALIZATION  BY RECOGNITION  BY DERIVATIVE CITIZENSHIP (RA No. 9225)

7b. HAS THE APPLICANT EVER BEEN ISSUED A REGULAR PHILIPPINE PASSPORT?  
 YES  NO IF YES, PLEASE PROVIDE PASSPORT NO.:

8. STATUS OF BIRTH  LEGITIMATE  ILLEGITIMATE

9. DISTINGUISHING MARKS ON FACE:

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

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

**APPLICANT'S CONTACT DETAILS**

12. MOBILE PHONE OF PARENT /GUARDIAN: 13. WORK PHONE OF PARENT/GUARDIAN:

14. PERSONAL E-MAIL OF PARENT/ GUARDIAN:

15. PRESENT ADDRESS:

15b. HOME ADDRESS:

16. WHERE DO YOU WISH YOUR PASSPORT TO BE DELIVERED?  PRESENT ADDRESS  HOME ADDRESS

**PARENTAL INFORMATION**

<b>17. FATHER'S DETAILS</b>	<b>18. MOTHER'S DETAILS</b>
Last Name:	Last Name:
First Name:	First Name:
Middle Name:	Middle Name:
Citizenship <i>(at the time of applicant's birth)</i>	Citizenship <i>(at the time of applicant's birth)</i>

**DECLARATION OF APPLICANTS**

**I HEREBY DECLARE AND AFFIRM** that 1) The applicant is a Filipino citizen. 2) I am the parent or legal guardian of the minor. 3) The information provided in this application is 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 its use 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 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.

\_\_\_\_\_  
19. SIGNATURE OVER PRINTED NAME

\_\_\_\_\_  
20. DATE (EX 01 Jan 2017)

**DO NOT WRITE BELOW THIS LINE, FOR THE EMBASSY'S USE ONLY**

<b>PROOF OF CITIZENSHIP SUBMITTED</b> <input type="checkbox"/> BIRTH CERTIFICATE from Philippine Statistic Authority <input type="checkbox"/> REPORT OF BIRTH from PHL Statistics authority/PHL Embassy Consulate <input type="checkbox"/> CERTIFICATE OF NATURALIZATION <input type="checkbox"/> IDENTIFICATION CERTIFICATE OF CITIZENSHIP <input type="checkbox"/> Others: _____			<b>IDENTITY DOCUMENT SUBMITTED</b> <input type="checkbox"/> SCHOOL IDENTITY CARD <input type="checkbox"/> DSWD CLEARANCE <input type="checkbox"/> OTHERS: _____			<b>OTHER SUPPORTING DOCUMENTS</b> <input type="checkbox"/> PARENT/GUARDIAN'S ID <input type="checkbox"/> AFFIDAVIT OF CONSENT TO TRAVEL/SPECIAL POWER OF ATTORNEY <input type="checkbox"/> COURT DECREE ON ADOPTION/GUARDIANSHIP <input type="checkbox"/> Others		
<b>REMARKS:</b>  		<b>PASSPORT WATCHLIST VERIFICATION:</b>  		<b>RETURNED CANCELLED PASSPORT SIGNATURE OF APPLICANT:</b>  				
<b>PROCESSOR'S SIGNATURE:</b>  			<b>ENCODER'S SIGNATURE:</b>  					
<b>OFFICIAL RECEIPT/PAYMENT SLIP NO:</b>  			<b>DATE OF TRANSACTION:</b>  					

END