

EMBASSY OF THE PHILIPPINES
Uhlandstrasse 97
10715 Berlin

FOR OFFICIAL USE ONLY

PASSPORT NO:	DATE ISSUED:	SERVICE NO: DATE PAID:
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PLEASE FILL IN BLANKS: TYPE OR PRINT LEGIBLY

SURNAME: _____ GIVEN NAME: _____ MIDDLE NAME: _____ DATE OF BIRTH: _____ PLACE OF BIRTH: _____ SEX ☐ Male ☐ Female	Paste one 1.77" x 1.37" or 4.5cm x 3.5 cm New colored or BW photo with plain white background
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CIVIL STATUS ☐ Married ☐ Single ☐ Annulled/Divorced
Name of Spouse, if married: _____ Citizenship: _____
If divorced or widowed, name of previous spouse: _____ Citizenship: _____
ADDRESS in Germany: _____
Tel. No./ Fax No.: _____
PHILIPPINE ADDRESS: _____

IMMIGRATION STATUS:
☐ Permanent Resident ☐ Tourist ☐ Student ☐ Contract Worker ☐ Business ☐ Seaman ☐ Others
OCCUPATION: _____
OFFICE OF EMPLOYMENT: _____ TEL. NO.: _____

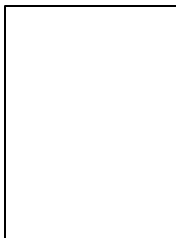
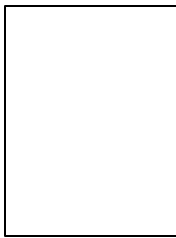
CHECK IF YOU ARE: Have you ever been issued a Philippine Passport?
☐ Legitimate ☐ Illegitimate ☐ YES ☐ NO

CITIZENSHIP ACQUIRED BY: If YES:
☐ Birth ☐ Naturalization Latest Passport No.: _____
☐ Election ☐ Marriage Place & Date of Issue: _____

Are you a government employee?
☐ YES ☐ NO

In case of accident or death, please notify:

Philippines: Name: _____	Abroad: Name: _____
Address: _____	Address: _____
Tel No: _____	Tel No: _____

	
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I SOLEMNLY SWEAR THAT THE ABOVE ATTACHED PHOTOGRAPH IS MINE; THAT THE STATEMENTS MADE ON THIS APPLICATION FORM ARE TRUE & ATTACHED SUPPORTING DOCUMENTS ARE AUTHENTIC; SO HELP ME GOD:

SIGNATURE OF APPLICANT