



<b>12. APPLICANT'S SPOUSE'S NAME:</b>		
<b>13a. PERSON TO CONTACT IN CASE OF EMERGENCY:</b>		<b>13b. TEL/MOBILE NO. OF PERSON TO NOTIFY</b>
<b>PARENTAL INFORMATION</b>		<b>APPLICANT'S CURRENT PASSPORT DETAILS</b>
<b>14. FATHER'S DETAILS</b> Last Name:	<b>15. MOTHER'S DETAILS (Maiden Name)</b> Last Name:	<b>16a. PASSPORT NUMBER</b>
First Name:	First Name:	<b>16b. DATE OF ISSUE</b>
Middle Name:	Middle Name:	<b>16c. DATE OF EXPIRY</b>
Citizenship <i>(at time of applicant's birth)</i>	Citizenship <i>(at time of applicant's birth)</i>	<b>16d. ISSUING AUTHORITY</b>
<b>STATUS OF CURRENT PASSPORT</b>		
<b>19. Please choose as applicable:</b>  <input type="checkbox"/> Passport Intact  <input type="checkbox"/> Damaged Passport  <input type="checkbox"/> Affidavit of Explanation		<input type="checkbox"/> Lost Passport Passport <ul style="list-style-type: none"> <li>• Affidavit of Loss</li> <li>• Police Report in English</li> </ul> <input type="checkbox"/> Lost Expired Passport <ul style="list-style-type: none"> <li>• Affidavit of Explanation</li> </ul>
<b>DECLARATION OF APPLICANTS</b>		
<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 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>		
_____ <b>20. SIGNATURE OVER PRINTED NAME</b>		_____ <b>21. DATE (ex. 01 Jan 2017)</b>
<b>DO NOT WRITE BELOW. FOR THE EMBASSY'S USE ONLY.</b>		
<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>TRANSMITTING OFFICER'S SIGNATURE:</b>
<b>OFFICIAL RECEIPT / PAYMENT SLIP NO.:</b>	<b>DATE OF TRANSACTION:</b>	