

Republic of the Philippines  
DEPARTMENT OF FOREIGN AFFAIRS

Post: \_\_\_\_\_

PASSPORT APPLICATION FORM (FA FORM NO. 79)

THIS APPLICATION FORM IS NOT FOR SALE  
PLEASE DO NOT LEAVE ANY SPACES BLANK. INDICATE N/A IF NOT APPLICABLE.  
PROVIDING FALSE STATEMENTS IN PASSPORT APPLICATION IS PUNISHABLE BY LAW (R.A. NO. 8239).

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LAST NAME / APELYIDO _____		FIRST NAME / PANGALAN (JR./III) _____	
PLACE OF BIRTH/POOK NG KAPANGANAKAN _____		MIDDLE NAME / GITNANG PANGALAN _____	
_____/_____/_____ Month Day Year		GENDER / KASARIAN <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
DATE OF BIRTH / PETA NG KAPANGANAKAN (Ex. April 25, 2014)			

Civil Status:  Single  Married  Widow/or  Legally Separated  Annulled  Divorced

Complete Address in the Philippines: \_\_\_\_\_

Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_ E-mail address: \_\_\_\_\_

Present Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Address in Philippines or Abroad: \_\_\_\_\_

Tel. No. \_\_\_\_\_ Fax No. \_\_\_\_\_ E-mail Address: \_\_\_\_\_

SSS No. \_\_\_\_\_ OWWA Membership ID No. \_\_\_\_\_ (if any)

Tax Identification No. (TIN) \_\_\_\_\_ Overseas Employment Certificate (OEC) No. \_\_\_\_\_ (if any)

Driver's License No. \_\_\_\_\_ PAG-IBIG ID No. \_\_\_\_\_

PHILHEALTH ID No. \_\_\_\_\_ Community Tax Certificate (CEDULA) No. \_\_\_\_\_

Name of Wife/Husband: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Complete Address in the Philippines: \_\_\_\_\_

Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_ E-mail address: \_\_\_\_\_

Name of Father: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Maiden/Single Name of Mother: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Complete Address in the Philippines: \_\_\_\_\_

Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_ E-mail Address: \_\_\_\_\_

In case of emergency, name of next-of-kin (NOK) to be contacted: \_\_\_\_\_

Complete Address in the Philippines: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile No. \_\_\_\_\_ E-mail address: \_\_\_\_\_

Citizenship acquired By: <input type="checkbox"/> Birth <input type="checkbox"/> Election <input type="checkbox"/> Marriage <input type="checkbox"/> Naturalization <input type="checkbox"/> R.A. 9225
<input type="checkbox"/> Others _____

Are you a holder of a foreign passport? [ ] YES [ ] NO If YES, from what country? _____	Have you been issued a Philippine Passport? [ ] YES [ ] NO If YES, latest Passport No. _____ Date of Issue: _____ Place of Issue: _____
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**For Applicants below 18 years old ONLY:**

Name of Minor's Travelling Companion: \_\_\_\_\_

Companion's Relationship to the Minor: \_\_\_\_\_

Complete Address: \_\_\_\_\_ Tel: No. \_\_\_\_\_

I SOLEMNLY SWEAR that 1) I am a Filipino citizen. 2) The information in this application are true and correct. 3) The supporting documents attached are authentic. 4) I am aware that under the law, I am allowed to hold only one Philippine passport at any given time. 5) I am aware that making false statements in passport application, furnishing falsified or forged documents in support thereof are punishable by law.

\_\_\_\_\_  
 Signature of Applicant or Legal Guardian (for minor applicants)

FOR USE OF THE DEPARTMENT OF FOREIGN AFFAIRS ONLY. PLEASE DO NOT WRITE BELOW THIS LINE

REMARKS:	
Processor:	Encoder:
Signing	Transmission Officer:
RECEIVED CANCELLED PASSPORT:	RECEIVED NEW PASSPORT:
FOR ADMINISTRATIVE USE ONLY:	