

# PASSPORT RENEWAL FOR ADULT

Form No. 2 – ENGLISH

## RENEWAL REGULAR PASSPORT APPLICATION FORM (Adult)

DEPARTMENT OF FOREIGN AFFAIRS

THIS FORM IS NOT FOR SALE

Office of Consular Affairs Last Revision: 07 October 2017

**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 (v) boxes as appropriate.

**PHILIPPINE CONSULATE GENERAL  
LOS ANGELES, CALIFORNIA**

### 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 the PHL: Municipality/City & Province  
For born outside the PHL: Country)

7. CIVIL STATUS

SINGLE

MARRIED

WIDOW/ER

NULLIFIED /

ANNULLED\*

DIVORCED\*

\*must be recognized by PH court

8a. HOW DID YOU ACQUIRE PHL  
CITIZENSHIP?

BY BIRTH

BY NATURALIZATION

BY RE-ACQUISITION (RA no. 9225)

BY ELECTION

BY LEGISLATION

8b. DID YOU EVER LOSE YOUR PH CITIZENSHIP?

YES  NO

8c. ARE YOU CURRENTLY A CITIZEN OF ANOTHER  
COUNTRY?  YES  NO

8d. IF YES, FROM WHAT COUNTRY?

8e. HAVE YOU SERVED IN ANY FOREIGN  
MILITARY?  YES  NO

IF Yes, what country? \_\_\_\_\_

### APPLICANT'S CONTACT INFORMATION

9a. PRESENT ADDRESS:

9b. HOME ADDRESS:

10. WHERE DO YOU WISH YOUR PASSPORT TO BE DELIVERED? BRING SELF ADDRESSED MAILING ENVELOPE  
WITH POSTAGE PREPAID

PRESENT ADDRESS  HOME ADDRESS

11. TELEPHONE/MOBILE NUMBER:

12. e-MAIL ADDRESS:

<b>13. APPLICANT'S SPOUSE'S NAME:</b>		
<b>14a. PERSON TO CONTACT IN CASE OF EMERGENCY:</b>		<b>14b. TEL/MOBILE NO. OF PERSON TO NOTIFY:</b>
<b>PARENTAL INFORMATION</b>		<b>APPLICANT'S PASSPORT DETAILS</b>
<b>15. FATHER'S DETAILS</b> Last Name:	<b>16. MOTHER'S DETAILS</b> Last Name:	<b>17a. PASSPORT NUMBER</b>
First Name:	First Name:	<b>17b. DATE OF ISSUE</b>
Middle Name:	Middle Name:	<b>17c. DATE OF EXPIRY</b>
<b>Citizenship</b> <i>(at time of applicant's birth)</i>	<b>Citizenship</b> <i>(at time of applicant's birth)</i>	<b>17d. ISSUING AUTHORITY</b>
<b>STATUS OF CURRENT PASSPORT</b>		
<b>19. Please choose as applicable:</b> <input type="checkbox"/> <b>Passport Intact</b> <input type="checkbox"/> <b>Damaged Passport</b> <ul style="list-style-type: none"> <li>• Affidavit of Explanation</li> </ul>		<input type="checkbox"/> <b>Lost Valid Passport</b> <ul style="list-style-type: none"> <li>• Affidavit of Loss</li> <li>• Police Report in English</li> </ul> <input type="checkbox"/> <b>Lost Expired Passport</b> <ul style="list-style-type: none"> <li>• Affidavit of Explanation</li> </ul>
<b>DECLARATION OF APPLICANTS</b>		
<p><b>I HEREBY DECLARE AND AFFIRM</b> 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>		
<hr/> <b>20. SIGNATURE OVER PRINTED NAME</b>		<hr/> <b>21. DATE (ex. 01 Jan 2017)</b>
<b>DO NOT WRITE BELOW THIS LINE. FOR THE DEPARTMENT'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>OFFICIAL RECEIPT/PAYMENT SLIP NO:</b>	<b>DATE OF TRANSACTION:</b>	

**END**