Number of Entries Requested

Single-Entry

Multiple-Entry

Foreign Service of the Philippines

Philippine Embassy/Consulate, \_\_\_\_\_\_\_\_\_ FA Form No.2

**APPLICATION FOR NON-IMMIGRANT VISA**

**Please provide requested information. Answers must be in English, legibly in BLOCK letters. Use BLUE or BLACK PEN and write “N/A” if not applicable.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Surname | | | | First name | | | | | | | Applicant’s Passport-size Photograph taken within the last 6 months  **DO NOT STAPLE** | | |
| Sex  Male Female | | Citizenship | | | | | | Date of Birth (dd/mm/yy) | | |
| Place of Birth | | | | | Civil Status  Single Widowed  Legally Separated  Married  Name of spouse:\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_ | | | | | |
| Age | | | | |
| Contact No. | | | | |
| Home Address | | | | | | | | | | | | | |
| Occupation | | | Office of Employment and Address | | | | | | | | | | |
| Father’s Name | | | | | | Mother’s name | | | | | | | |
| Name and ages of Children, if any: | | | | | | | | | | | | | |
| Passport No. | Issued by: | | | | Date of Issue (dd/mm/yy) | | | | | Valid Until (dd/mm/yy) | | | |
| Purpose of Entry: Leisure Business Others:\_\_\_\_\_\_\_\_\_\_\_\_  Wellness Official Business | | | | | | | | | Length of stay in the Philippines  ( ) days | | | | |
| Port of Entry | | National ID No. | | | | | Destination after the Philippines (if applicable) | | | | | | |
| List of Documents Submitted:  Original Passport Proof of Financial Capacity Invitation letter Air Ticket  National ID Others (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
| *Please answer the following questions:* | | | | | | | | | | | | Yes | No |
| Have you ever been issued a Philippine visa? | | | | | | | | | | | |  |  |
| Do you have a sponsor in the Philippines?  Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |
| Were you ever been refused any kind of Philippine visa before and denied admission into the Philippines? If yes, state circumstances: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |
| Have you ever been afflicted with a communicable or mental disease of public health significance, dangerous physical or mental disorder, or been a drug abuser or addict? If yes, state circumstances: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |
| Have you previously worked or do you intend to work in the Philippines? If Yes, please provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |
| Do you have any communicable or other disease of public health significance, dangerous physical or mental disorder, or been a drug abuser or addict? If Yes, please provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |
| Have you ever been arrested or convicted of any offense or crime, even though subject of a pardon, amnesty, or other legal action in the Philippines or any other country? If Yes, state the circumstances. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |
| Have you ever served in the military or served as a Foreign Agent of a foreign government? If yes, state the circumstances.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  |

I understand that I may enter the Philippines at the Port of Entry designated by the Philippine Immigration Authorities and under the condition imposed by those authorities.

I solemnly swear that the foregoing statements are true to the best of my knowledge.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ (dd/mm/yyyy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Signature of Applicant

SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY OF \_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Consul of the Republic of the Philippines

***----------For Embassy/Consulate Official Use Only----------***

Visa no.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as non-immigrant under Section (\_\_\_\_\_) of the Philippine Immigration Act of 1940, as amended.

|  |  |  |
| --- | --- | --- |
| OR No.: | Remarks: | (seal)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Consul of the Republic of the Philippines |
| Fee: |
| SN: |