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 StatusSingle WidowedLegally 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.

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