

PARENTAL INFORMATION

16. FATHER'S DETAILS	17. MOTHER'S DETAILS
Last Name	Last Name
First Name	First Name
Middle Name	Middle Name
Citizenship <i>(at time of applicant's birth)</i>	Citizenship <i>(at time of applicant's birth)</i>

DECLARATION OF PARENT OR LEGAL GUARDIAN OF THE APPLICANT

I HEREBY DECLARE AND AFFIRM that 1) The applicant is a Filipino citizen. 2) I am the parent or legal guardian of the minor. 3) The information provided in this application is true and correct. 4) The supporting documents attached are authentic. 4) I consent to the verification by the Philippine Government of the information I provided to establish the applicant's 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, the applicant is only allowed to hold 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.

**19. SIGNATURE OVER PRINTED NAME
 OF PARENT OR LEGAL GUARDIAN**

20. DATE (ex. 01 JAN 2017)

DO NOT WRITE BELOW THIS LINE. FOR THE DEPARTMENT'S USE ONLY.

PROOF OF CITIZENSHIP SUBMITTED <input type="checkbox"/> BIRTH CERTIFICATE from Philippine Statistics Authority <input type="checkbox"/> REPORT OF BIRTH from PHL Statistics Authority/PHL Embassy or Consulate <input type="checkbox"/> CERTIFICATE OF NATURALIZATION <input type="checkbox"/> IDENTIFICATION CERTIFICATE of CITIZENSHIP <input type="checkbox"/> Others: _____	IDENTITY DOCUMENT SUBMITTED <input type="checkbox"/> SCHOOL IDENTITY CARD <input type="checkbox"/> DSWD CLEARANCE <input type="checkbox"/> Others: _____	OTHER SUPPORTING DOCUMENTS <input type="checkbox"/> PARENT/GUARDIAN'S ID <input type="checkbox"/> AFFIDAVIT OF CONSENT TO TRAVEL/SPECIAL POWER OF ATTORNEY <input type="checkbox"/> COURT DECREE ON ADOPTION/GUARDIANSHIP <input type="checkbox"/> Others: _____
--	---	--

REMARKS:	PASSPORT WATCHLIST VERIFICATION:	RETURNED CANCELLED PASSPORT Parent or Legal Guardian's Signature:
-----------------	---	--

PROCESSOR'S SIGNATURE:	ENCODER'S SIGNATURE:
-------------------------------	-----------------------------

OFFICIAL RECEIPT/PAYMENT SLIP NO.:	DATE OF TRANSACTION:
---	-----------------------------

--	--

END