



PHILIPPINE CONSULATE GENERAL CHONGQING

Request for Certification of Passport

NAME: _____
(Last Name) (First Name) (Middle Name)

Address in China _____

Address in the Philippines _____

Contact Details

Mobile Number _____

Email Address _____

Passport Details

Passport No. _____

Date of Issue _____

Place of Issue _____

Visa Immigration Status

Permanent Resident Tourist Student Worker Seaman

International Organization Employee

Others (specify) _____

Purpose of Request: _____

I HEREBY CERTIFY UNDER PENALTY OF LAW TO THE TRUTH AND ACCURACY OF THE ABOVE STATEMENTS AND THAT THIS APPLICATION WAS PREPARED BY ME PERSONALLY OR UNDER MY PERSONAL DIRECTION.

Signature of Applicant

Date: _____

O.R. No.: _____

Service No. _____

Fee Paid _____