**PHILIPPINE EMBASSY, KUWAIT**

**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 (✓) boxes as appropriate.

**SITE:** KUWAIT  
**Date/Time:**  
**Booking Reference no.:** NONE

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**CAPTURE SITE PRE-PROCESSING (Do not write on this part)**

**APPOINTMENT VERIFICATION:**  
**WALK IN**  
**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/Cty & Province  
   For born outside the PHL: Country)

7. **CIVIL STATUS**  
   - [ ] SINGLE  
   - [ ] MARRIED  
   - [ ] WIDOW/ER  
   - [ ] NULLIFIED / ANNULLED  
   - [ ] DIVORCED

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?**

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**APPLICANT'S CONTACT INFORMATION**

9a. **PRESENT ADDRESS:**

9b. **HOME ADDRESS:** IN KUWAIT

10. **WHERE DO YOU WISH YOUR PASSPORT TO BE DELIVERED?**  
   - [ ] PRESENT ADDRESS  
   - [ ] HOME ADDRESS

11. **TELEPHONE/MOBILE NUMBER:** IN KUWAIT

12. **e-MAIL ADDRESS:**

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*Page 1 of 2*
13. APPLICANT’S SPOUSE’S NAME:

14a. PERSON TO CONTACT IN CASE OF EMERGENCY: 

14b. TEL/MOBILE NO. OF PERSON TO NOTIFY: 

<table>
<thead>
<tr>
<th>PARENTAL INFORMATION</th>
<th>CURRENT PASSPORT DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. FATHER’S DETAILS</td>
<td>16. MOTHER’S DETAILS</td>
</tr>
<tr>
<td>Last Name:</td>
<td>Last Name:</td>
</tr>
<tr>
<td>First Name:</td>
<td>First Name:</td>
</tr>
<tr>
<td>Middle Name:</td>
<td>Middle Name:</td>
</tr>
<tr>
<td>Citizenship (at time of applicant’s birth)</td>
<td>Citizenship (at time of applicant’s birth)</td>
</tr>
</tbody>
</table>

| 17a. PASSPORT NUMBER | 17b. DATE OF ISSUE | 17c. DATE OF EXPIRY | 17d. ISSUING AUTHORITY |

19. Please choose as applicable:

- [ ] Passport Intact
- [ ] Damaged Passport
  - Affidavit of Explanation
- [ ] Lost Valid Passport
  - Affidavit of Loss
  - Police Report in English
- [ ] Lost Expired Passport
  - Affidavit of Explanation

DECLARATION OF APPLICANTS

I HEREBY DECLARE AND AFFIRM 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.

20. SIGNATURE OVER PRINTED NAME

21. DATE (ex. 01 Jan 2017)

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

REMARKS: 

PASSPORT WATCHLIST VERIFICATION: 

RETURNED CANCELLED PASSPORT SIGNATURE OF APPLICANT: 

PROCESSOR’S SIGNATURE: 

ENCODER’S SIGNATURE: 

OFFICIAL RECEIPT/PAYMENT SLIP NO: 

DATE OF TRANSACTION: 

END