

REPUBLIC OF THE PHILIPPINES DEPARTMENT OF FOREIGN AFFAIRS

APPLICATION FOR QUOTA/ NON-QUOTA IMMIGRANT VISA

This form and requirements should be accomplished in triplicate, the original to be given to the applicant and the duplicate copy to be filed at the Post.

Foreign Service Post: BERNE GENEVA

Please paste one (1)

4.5 cm x 3.5 cm

FA Form No.3 (revise	d 2000)				-	ast 6 months	
Visa No		Date:					
VIOG 140.							
Surname		First Name		Middle Name		ex: Male Female	
Date of Birth:			Citizenship	:		Tomaio	
Place of Birth:							
Civil Status:	[] Single	[] Married	[] Widowe	owed [] Separated [] Divorced			
Contact Details:					1 6 3		
	Telephone:		Email:				
If married, state n	ame and addre	ess of spouse:		-			
Names and dates	of birth of child	dren:					
Applicant's Addre	ss/es for the la	st 5 years:					
1.			Since:				
2.			Since:				
Occupation:			Since:				
Father's Name:			Mother's Name:				
Place where the a	applicant intend	s to reside in the Ph	ilippines:				
Occupation to be	pursued:						
Name and address	ss of employer,	if any:					
Nearest relatives	in the Philippin	es:					
Name			Address		Relation	Relationship	
1.							
2.							
Have you ever be	en institutionali	zed for any mental d	lisorder?[]	Yes []No			
If yes, state when							
Do you have any	physical defect	?[]Yes []No					
If yes, state natur	e of defect:						
Have you ever be If yes, state when		f any crime? [] Yes ature:	[] No				
Are you afflicted v		ious disease? [] Ye	s []No				
If yes, state natur	e:						

State the basis of your claims as [] preference quota immigrant [] non-quota:
Were you ever refused a visa of any kind by any Philippine Diplomatic or Consular post? [] Yes [] No
If yes, state where, when, and the reason:
Were you ever refused of any kind of Philippine visa, denied admission into or deported from the Philippines and removed at government expense from the Philippines and other countries? [] Yes [] No If yes, state circumstances:
I understand that I may enter the Philippines at the port of entry designated by the Philippine Immigration authorities and under the conditions imposed by those authorities.
I solemnly swear that the foregoing statements are true to the best of my knowledge.
 Date
Signature of Applicant
SUBSCRIBED AND SWORN to before me this day of
(seal)
Consul of the Republic of the Philippines
(For Official Use Only)
Immigrant Visa No. BE-MRRV
[] Quota Immigrant No of the Philippine Immigration Act of 1940, as amended.
Issued on Valid Until
Bearer has the following travel document:
Type: No.: Issued by: Date of Issue: Valid until:
Date of Issue: valid until:
(seal)
Consul of the Republic of the Philippines
Date:
Service No.:
O.R. No.:
Fee Paid: