



CONSOLIDATED GENERAL APPLICATION FORM FOR NON-IMMIGRANT VISA, SPECIAL WORK PERMIT AND PROVISIONAL WORK PERMIT [EXCEPT STUDENT VISA AND SSP]

I. APPLICATION INFORMATION

Present Immigration Status
Nature of Application
Type of Visa/Permit Application
Number of Months/Years Applied For
Method of Application
BI Accreditation Number
Name of Authorized Representative
Position in the Company/Institution

II. APPLICANT'S TRAVEL INFORMATION

Passport Number
Date of Latest Arrival
Expiry Date/Valid Until
Flight Number
Place of Issuance
Last Day of Authorized Stay

III. APPLICANT'S PERSONAL INFORMATION

Last Name
First/Given Name
Middle Name
Other Name(s)/Alias(es)
Date of Birth
Gender
Country of Birth
Citizenship/Nationality
Civil Status
Height
Weight
Profession/Occupation
Contact Number(s) in the Philippines
Residential Address in the Philippines
Residential Address Abroad
Name of Spouse
Other Name(s)/Alias(es)
Name(s) of Child(ren) and Date(s) of Birth

Note: If the applicant has more than two (2) children, use BI Form 2014-00-005 Rev 0

APPLICANT'S ACR I-CARD CLAIM STUB

Applicant's Name
ACR Number
Visa Type

[IF THE ACR I-CARD IS CLAIMED BY AN AUTHORIZED REPRESENTATIVE, PLEASE SEE REVERSE SIDE FOR INSTRUCTIONS.]



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Character References in the Philippines

Last Name, First/Given Name, Middle Name

1 [Grid for character reference 1]

Residential Address in the Philippines

House/Unit No., Street, Subdivision/Village

[Grid for residential address 1]

Barangay, Municipality/City

[Grid for barangay 1]

Province, Zip Code

[Grid for province 1]

Last Name, First/Given Name, Middle Name

2 [Grid for character reference 2]

Residential Address in the Philippines

House/Unit No., Street, Subdivision/Village

[Grid for residential address 2]

Barangay, Municipality/City

[Grid for barangay 2]

Province, Zip Code

[Grid for province 2]

Contact Number(s) in the Philippines

Landline

[Grid for landline 1]

Mobile

[Grid for mobile 1]

Contact Number(s) in the Philippines

Landline

[Grid for landline 2]

Mobile

[Grid for mobile 2]

IV. PETITIONER'S INFORMATION

Name of Institution

[Grid for institution name]

[Grid for institution name]

Registration Number

[Grid for registration number]

Nature of Institution

Commercial

Religious

Others [Please specify] _____

Registered Address in the Philippines

House/Unit No., Street, Subdivision/Village

[Grid for registered address]

Barangay, Municipality/City

[Grid for barangay]

Province, Zip Code

[Grid for province]

Contact Number(s) in the Philippines

Landline

[Grid for landline]

Mobile

[Grid for mobile]

V. APPLICANT'S OTHER INFORMATION

Position in the Organization

[Grid for position]

Alien Employment Permit (AEP) Number

[Grid for AEP number]

AEP Expiry Date/Valid Until [DD-MMM-YYYY e.g. 01 JAN 1990]

[Grid for AEP expiry]

VI. ACR I-Card

Alien Certificate of Registration (ACR) Number

[Grid for ACR number]

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

[Grid for date of issuance]

Expiry Date/Valid Until [DD-MMM-YYYY e.g. 01 JAN 1990]

[Grid for expiry date]

Certificate of Residence Number (CRN)

[Grid for CRN]

Expiration of Contract [DD-MMM-YYYY e.g. 01 JAN 1990]

[Grid for contract expiration]

Actual Monthly Gross Salary in Philippine Currency

[Grid for salary]

DO NOT FILL OUT THIS PORTION

Application Number

[Grid for application number]

Received/Recommended by: _____

Reviewed by: _____

Approved by: _____

CERTIFICATION

I/We certify that: (1) All the information in the application is truthful, complete and correct; (2) All documents are authentic and were legally obtained from the corresponding government agencies or private entities; (3) I/We understand that my/our application may be summarily denied if: (a) Any statement is false; (b) Any document submitted is falsified; or (c) I/We fail to comply with all the BI requirements without prejudice to whatever action the BI may take; and (4) I/We have not filed this or any similar application before any office of the Bureau.

Date [DD-MMM-YYYY e.g. 01 JAN 1990]

Petitioner's Signature over Printed Name

Applicant's Signature over Printed Name

Name of Representative _____

Accredited Travel Agency/Law Office _____

BI Accreditation No. _____

Contact No. _____

Residential /Office Address _____

Signature _____

ACR I-CARD WILL ONLY BE RELEASED UPON COMPLIANCE/SUBMISSION OF THE FF:

- 1. Photocopy of passport bio-page of the ACR I-Card holder
2. Valid ID of either parent claiming the ACR I-Card, if applicant is a minor
3. Photocopy of the BI-Accreditation ID card, if claimed by a travel agent or law firm
4. Special Power of Attorney (SPA), if claimed by an authorized representative other than the parent or BI accredited entity

ACR I-Card Holder: _____ Claimant: _____
Signature over PRINTED NAME Signature

[Please call (+632) 525-7557 to check the status of your application]