



**PHILIPPINE CONSULATE GENERAL**  
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**4.5 cm X 3.5 cm  
 PHOTO**

**WHITE**  
 background taken  
 within last six (6)  
 months, without  
 eyeglasses, clearly  
 showing the full front  
 view of the face

**APPLICATION FOR NON-IMMIGRANT VISA**

<b>SURNAME</b>		<b>GIVEN NAME</b>		<b>MIDDLE NAME</b>		<b>SEX</b> ( ) Male ( ) Female	
<b>DATE OF BIRTH:</b> DAY MONTH YEAR			<b>PLACE OF BIRTH:</b> CITY PROVINCE COUNTRY			<b>CITIZENSHIP</b>	
<b>PRESENT ADDRESS:</b> House No. Street Town Province Country Postal Code						<b>TELEPHONE NO.:</b>	
<b>CIVIL STATUS:</b> ( ) SINGLE ( ) MARRIED ( ) WIDOWED ( ) DIVORCED ( ) SEPARATED							
<b>If married, state name and address of spouse:</b> Name: Address:							
<b>OCCUPATION:</b> Company Name: Address: Telephone No.:					<b>FINANCIAL MEANS OF SUPPORT WHILE IN THE PHILIPPINES:</b>		
<b>PASSPORT NO.:</b>		<b>DATE OF ISSUE:</b> (Day/Month/Year)		<b>ISSUED IN</b>		<b>VALID UNTIL</b> (dd/mm/yyyy)	
<b>PURPOSE OF ENTRY:</b>			<b>LENGTH OF STAY:</b>		<b>PORT OF ENTRY IN THE PHILIPPINES</b>		
<b>DESTINATION/S IN THE PHILIPPINES:</b>				<b>ADDRESS IN THE PHILIPPINES:</b>			
<b>REFERENCE/CONTACT PERSON IN THE PHILIPPINES:</b> Name Address Telephone No.							
<b>Supporting Documents submitted and offered for inspection in support of visa application:</b>							
Have you been convicted of any crime? ( ) Yes ( ) No If Yes, provide details:							
Do you have a communicable disease? ( ) Yes ( ) No If Yes, provide details:							
Do you have a history of mental illness? ( ) Yes ( ) No If Yes, provide details:							
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, provide details:							
<p>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.</p> <p>I solemnly swear that the foregoing statements are true to the best of my knowledge:</p> <p>_____ Date _____ Signature of Applicant</p> <p>SUBSCRIBED AND SWORN to before me this ____ day of _____</p> <p>_____ Consul of the Republic of the Philippines</p>							
<b>IMPORTANT: IF APPLICANT IS UNABLE TO APPLY IN PERSON, THIS FORM MUST BE NOTARIZED.</b>							
SUBSCRIBE AND SWORN to before me this _____ day of _____ at _____ the affiant exhibiting the following identification (type) _____ number _____ issued at _____ on _____ _____ Notary Public							
(For Official use only) Non-immigrant Visa No. _____ under section _____ of _____ Immigration Act of 1940, as amended issued to _____ on _____ and valid until _____ consular notation _____ Visa Sheet No. _____ Purpose: _____ Number of entries: _____ Service No.: _____ O.R. No.: _____ _____ Processor _____ Consul of the Republic of the Philippines							