

Number of Entries Requested
 Single-Entry
 Multiple-Entry



Foreign Service of the Philippines
 Philippine Embassy, Phnom Penh

FA Form No.2

APPLICATION FOR NON-IMMIGRANT VISA

Please provide requested information. Answers must be in English, legibly in BLOCK letters. Use BLUE or BLACK PEN and write "N/A" if not applicable.

| | | | | | |
|---|--|---|--|---|----|
| Surname | | First name | | Applicant's Passport-size Photograph taken within the last 6 months DO NOT STAPLE | |
| Sex <input type="checkbox"/> Male <input type="checkbox"/> Female | Citizenship | | Date of Birth (dd/mm/yy) | | |
| Place of Birth | Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Legally Separated <input type="checkbox"/> Married | | Name of spouse: _____ | | |
| Age | | | | | |
| Contact No. | | | | | |
| Home Address | | | | | |
| Occupation | | Office of Employment and Address | | | |
| Father's Name | | Mother's name | | | |
| Name and ages of Children, if any: | | | | | |
| Passport No. | Issued by: | Date of Issue (dd/mm/yy) | Valid Until (dd/mm/yy) | | |
| Purpose of Entry: <input type="checkbox"/> Leisure <input type="checkbox"/> Business <input type="checkbox"/> Others: _____ <input type="checkbox"/> Wellness <input type="checkbox"/> Official Business | | | Length of stay in the Philippines () days | | |
| Port of Entry | National ID No. | Destination after the Philippines (if applicable) | | | |
| List of Documents Submitted: <input type="checkbox"/> Original Passport <input type="checkbox"/> Proof of Financial Capacity <input type="checkbox"/> Invitation letter <input type="checkbox"/> Air Ticket <input type="checkbox"/> National ID <input type="checkbox"/> Others (please specify) _____ | | | | | |
| <i>Please answer the following questions:</i> | | | | Yes | No |
| Have you ever been issued a Philippine visa? | | | | | |
| Do you have a sponsor in the Philippines? Name: _____ Contact No.: _____ | | | | | |
| Were you ever been refused any kind of Philippine visa before and denied admission into the Philippines? If yes, state circumstances: _____ | | | | | |
| Have you ever been afflicted with a communicable or mental disease of public health significance, dangerous physical or mental disorder, or been a drug abuser or addict? If yes, state circumstances: _____ | | | | | |
| Have you previously worked or do you intend to work in the Philippines? If Yes, please provide details: _____ | | | | | |
| Do you have any communicable or other disease of public health significance, dangerous physical or mental disorder, or been a drug abuser or addict? If Yes, please provide details: _____ | | | | | |
| Have you ever been arrested or convicted of any offense or crime, even though subject of a pardon, amnesty, or other legal action in the Philippines or any other country? If Yes, state the circumstances. _____ | | | | | |
| Have you ever served in the military or served as a Foreign Agent of a foreign government? If yes, state the circumstances. _____ | | | | | |

I understand that I may enter the Philippines at the Port of Entry designated by the Philippine Immigration Authorities and under the condition imposed by those authorities.

I solemnly swear that the foregoing statements are true to the best of my knowledge.

Date: _____ (dd/mm/yyyy)

Name and Signature of Applicant

SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY OF _____.

Consul of the Republic of the Philippines

-----For Embassy/Consulate Official Use Only-----

Visa no. _____ as non-immigrant under Section (_____) of the Philippine Immigration Act of 1940, as amended.

| | | |
|---------|----------|--|
| OR No.: | Remarks: | (seal) |
| Fee: | | |
| SN: | | |
| | | _____ Consul of the Republic of the Philippines |