



**EMBASSY OF THE REPUBLIC OF THE PHILIPPINES
LISBON, PORTUGAL**

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APPLICATION FORM FOR TRAVEL DOCUMENT

Please Provide Correct Information and Do Not Leave Space Blank

SURNAME:		GIVEN NAME:		MIDDLE NAME:	
Date and Place of Birth:				Age:	
Present Address: (Abroad)					
Address in the Philippines:					
Civil Status:	Single	Married	Widow/er		
Contact Numbers:					
Occupation :					
Distinguishing Mark, (If Any) :					
Name of Spouse : (if married)					
Name of Father :					
Name of Mother:					
APPLICANT'S PASSPORT PARTICULARS					
Passport Number:		Date of Issuance:		Place of Issuance:	

_____ Applicant

_____ Date

For Official Use Only

Travel Document No. _____ Issued on _____ Valid Until _____

Signing Officer