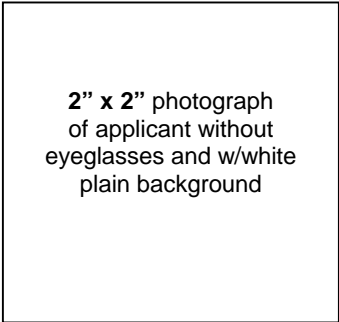


PHILIPPINE CONSULATE GENERAL

447 Sutter St., 6/F, San Francisco, California 94108
 Tel. No. (415) 433-6666; Fax No. (415) 421-2641
 E-mail address: **SanFranciscoPCG2004.com**



**APPLICATION FOR NON-IMMIGRANT VISA FOR
 TEMPORARY STAY FOR PLEASURE AND/OR BUSINESS**

PLEASE READ REQUIREMENTS BEFORE FILLING OUT FORM.
TYPE OR PRINT IN BLUE/BLACK INCK. VISA IS VALID FROM DATE OF ISSUANCE

Last Name		First Name		Middle Name		Sex: { }Male { }Female	
Place of Birth:	Date of Birth:	Age:	Citizenship:	Civil Status: () Single () Married () Widower/Widow () Separated () Divorced)			
If married, name and address of Spouse:							
Name of Father:				Name of Mother:			
Present Address:		Since:		Tel. Nos.:		Work: () Home: ()	
Occupation/Business:				Financial means of support:			
Passport No.:		Date of Issue:		Issued by:		Valid until:	
Purpose of Entry:				Date of Departure from the U.S.		Length of stay:	
Port of Entry:				Port of next destination:			
Address/Destination in the Philippines:							
Reference(s) and/or immediate relatives in the Philippines: Name(s): Complete Address(es):							
Are you entering or leaving the Philippines on a privately-owned yacht or sailboat?				Person(s) included in your passport and accompanying you to the Philippines:			
Have you ever been convicted of any crime? If yes, provide details.				Were you ever refused a Philippine Visa, denied admission to or deported from the Philippines or other countries? If yes, state circumstances.			

_____ Date of Application

_____ Signature of Applicant

(For Official use Only)

Non-Immigrant Visa No. SF-MRRV-_____ -20 granted on _____ as non-immigrant under Section 9(a) of the Philippine Immigration Act of 1940, as amended, valid until _____.

_____ **CONSULAR OFFICER**

Fee: US\$ _____ O.R. No. _____ Svc. No. _____	NO DEROGATORY INFORMATION AS OF THIS DATE:	Remarks Processor: DATE:
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