



Republic of the Philippines  
**COMMISSION ON ELECTIONS**

**APPLICATION FOR CHANGE / CORRECTION OF ENTRIES /  
INCLUSION OF RECORD IN THE BOOK OF VOTERS AND  
REINSTATEMENT OF NAME IN THE LIST OF VOTERS.**

**APPLICATION FOR CHANGE / CORRECTION OF ENTRIES**

Change of name by reason of marriage or by virtue of a court order  Correction of wrong or misspelled name in the list of voters  Correction of any other entry

**THE ELECTION REGISTRATION BOARD**

City/Municipality of \_\_\_\_\_

Province of \_\_\_\_\_

Through: The Election Officer

Dear Sir/Madam:

I, \_\_\_\_\_,  
*First name/Middle name/Last name*

Filipino, born on \_\_\_\_\_,  
*month/day/year* a duly registered voter, do hereby request that my

\_\_\_\_\_ as recorded in the list  
*(information to be changed or corrected)*

for Precinct No. \_\_\_\_\_, with address at \_\_\_\_\_  
*(Sitio, Barangay, Municipality)*

be changed from \_\_\_\_\_  
*(Present data)*

to \_\_\_\_\_  
*(New data)*

That said change/correction is necessary and valid as evidenced by the attached certification/order of the court.

\_\_\_\_\_  
*(Signature above Printed Name)*

SUBSCRIBED AND SWORN to before me on the above date.

\_\_\_\_\_  
EO/Chairman of the Election Registration Board  
*(Signature above Printed Name)*

COPY FOR THE ELECTION OFFICER

**APPLICATION FOR INCLUSION OF RECORDS IN THE BOOK OF VOTERS / REINSTATEMENT  
OF NAME IN THE LIST OF VOTERS**

Inclusion of VRR in the precinct book of voters  Reinstatement if registered voter whose name has been omitted in the list of voters

**THE ELECTION REGISTRATION BOARD**

City/Municipality of \_\_\_\_\_

Province of \_\_\_\_\_

Through: The Election Officer

Dear Sir/Madam:

I, \_\_\_\_\_, Filipino, born on \_\_\_\_\_,  
*First name/Middle name/Last name month/day/year*

with address at \_\_\_\_\_

a duly registered voter, do hereby request that my name which has been omitted in the list of voters/my registration record which has not been included in the precinct book of voters of Precinct no. \_\_\_\_\_, be reinstated/included therein.

The said reinstatement of name/inclusion of registration record is necessary and valid.

\_\_\_\_\_  
*(Signature above Printed Name)*

SUBSCRIBED AND SWORN to before me on the above date.

\_\_\_\_\_  
EO/Chairman of the Election Registration Board  
*(Signature above Printed Name)*

**Notice to the applicant:** If your biometrics, i.e. photograph, signature and fingerprints had not been captured digitally, please accomplish the form at the back.

Application No.

[Grid for Application No.]

Precinct No.

[Grid for Precinct No.]

Instructions : (1) Accomplish separately in three copies; (2) print legibly; (3) check the appropriate box.

Part 1 PERSONAL INFORMATION (To be filled out by Applicant)

Name

Last, First, Middle name grids

Illiterate Person with Disability

Assisted by: (Please fill-up Assistor's Oath)

Gender

Male Female Height Weight

RESIDENCE/ADDRESS

Province [Grid]

City/Municipality Barangay [Grids]

House No. / Street [Grid]

DATE OF BIRTH

Month Day Year [Grids]

PLACE OF BIRTH

City/Mun Province [Grids]

CITIZENSHIP

By Birth Naturalized Reacquired

(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate number of naturalization/order of approval of reacquisition)

Date of Naturalization/ Reacquisition Month Day Year Certificate No./Order of Approval

CIVIL STATUS

Single Married Widow/er Legally Separated

Name of Spouse, if married

PERIOD OF RESIDENCE

No. of Years No. of Months No. of Years in the City / Mun in the Philippines

PROFESSION / OCCUPATION

TIN [Grid]

NAME OF FATHER

Last, First, Middle name grids for father

NAME OF MOTHER

Last, First, Middle name grids for mother

Part 2 OATH

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualification of a voter; that I have no pending application for registration in any city/municipality.

DATE Month Day Year Signature of Applicant Above Printed Name

EO / Administering Officer (Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

Left Thumb Right Thumb [Grids]

1. 2. 3. [Grids]

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

Approved Disapproved Date Reason for disapproval With precinct assignment No.

Member Chairman of the Board Member (Signature above Printed Name)

Part 4 VOTER IDENTIFICATION NUMBER (To be filled out by Election Officer)

CITY/MUN/DISTRICT CODE Prov Code PRECINCT NO. DATE OF BIRTH Month Day Year

ACKNOWLEDGEMENT RECEIPT

Application No.

[Grid for Application No.]

This is to acknowledge receipt of your Application for registration. You are not yet registered unless approved by the Election Registration Board (ERB). You need not appear in the ERB hearing unless required through a written notice.

Application for Registration

Last, First, Middle name grids

EO/Interviewer Signature above Printed Name



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**THE ELECTION REGISTRATION BOARD**

City/Municipality of \_\_\_\_\_

Province of \_\_\_\_\_

Through: The Election Officer

Dear Sir/Madam:

I, \_\_\_\_\_,  
*First name/Middle name/Last name*

Filipino, born on \_\_\_\_\_,  
*month/day/year* a duly registered voter, do hereby request that my

\_\_\_\_\_ as recorded in the list  
*(information to be changed or corrected)*

for Precinct No. \_\_\_\_\_, with address at \_\_\_\_\_  
*(Sitio, Barangay, Municipality)*

be changed from \_\_\_\_\_  
*(Present data)*

to \_\_\_\_\_  
*(New data)*

That said change/correction is necessary and valid as evidenced by the attached certification/order of the court.

\_\_\_\_\_  
(Signature above Printed Name)

SUBSCRIBED AND SWORN to before me on the above date.

\_\_\_\_\_  
EO/Chairman of the Election Registration Board  
(Signature above Printed Name)

COPY FOR THE PROVINCIAL FILE

**APPLICATION FOR INCLUSION OF RECORDS IN THE BOOK OF VOTERS / REINSTATEMENT  
OF NAME IN THE LIST OF VOTERS**

Inclusion of VRR in the precinct book of voters      Reinstatement if registered voter whose name has been omitted in the list of voters

**THE ELECTION REGISTRATION BOARD**

City/Municipality of \_\_\_\_\_

Province of \_\_\_\_\_

Through: The Election Officer

Dear Sir/Madam:

I, \_\_\_\_\_, Filipino, born on \_\_\_\_\_,  
*First name/Middle name/Last name* *month/day/year*

with address at \_\_\_\_\_

a duly registered voter, do hereby request that my name which has been omitted in the list of voters/my registration record which has not been included in the precinct book of voters of Precinct no. \_\_\_\_\_, be reinstated/included therein.

The said reinstatement of name/inclusion of registration record is necessary and valid.

\_\_\_\_\_  
(Signature above Printed Name)

SUBSCRIBED AND SWORN to before me on the above date.

\_\_\_\_\_  
EO/Chairman of the Election Registration Board  
(Signature above Printed Name)

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Application No.

[Grid for Application No.]

Precinct No.

[Grid for Precinct No.]

Instructions : (1) Accomplish separately in three copies; (2) print legibly; (3) check the appropriate box.

**Part 1 PERSONAL INFORMATION (To be filled out by Applicant)**

**Name**

Last [Grid]
First [Grid]
Middle [Grid]

[ ] Illiterate [ ] Person with Disability

Assisted by: \_\_\_\_\_
(Please fill-up Assistor's Oath)

**Gender**

[ ] Male [ ] Female
Height \_\_\_\_\_ Weight \_\_\_\_\_

**RESIDENCE/ADDRESS**

Province [Grid]

City/Municipality [Grid] Barangay [Grid]

House No. / Street [Grid]

**DATE OF BIRTH**

[Grid] - [Grid] - [Grid]
Month Day Year

**PLACE OF BIRTH**

City/Mun \_\_\_\_\_
Province \_\_\_\_\_

**CITIZENSHIP**

\_\_\_\_\_ [ ] By Birth [ ] Naturalized [ ] Reacquired

(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate number of naturalization/order of approval of reacquisition)

Date of Naturalization/ Reacquisition Month Day Year Certificate No./Order of Approval \_\_\_\_\_

**CIVIL STATUS**

[ ] Single [ ] Widow/er
[ ] Married [ ] Legally Separated

Name of Spouse, if married \_\_\_\_\_

**PERIOD OF RESIDENCE**

No. of Years No. of Months No. of Years
In the City / Mun [Grid] [Grid] in the Philippines [Grid]

**PROFESSION / OCCUPATION**

\_\_\_\_\_ TIN [Grid] - [Grid] - [Grid]

**NAME OF FATHER**

Last [Grid]
First [Grid]
Middle [Grid]

**NAME OF MOTHER**

Last [Grid]
First [Grid]
Middle [Grid]

**Part 2 OATH**

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualification of a voter; that I have no pending application for registration in any city/municipality.

DATE [Grid] - [Grid] - [Grid]
Month Day Year Signature of Applicant Above Printed Name

EO / Administering Officer
(Signature above Printed Name)

**ROLLED THUMBPRINTS / SPECIMEN SIGNATURES**

[Box for Left Thumb]

[Box for Right Thumb]

Left Thumb

Right Thumb

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Part 3 ACTION BY THE ELECTION REGISTRATION BOARD**

[ ] Approved [ ] Disapproved [Grid] - [Grid] - [Grid]
Month Day Year

With precinct assignment No. [Grid] [Grid]

Date Reason for disapproval \_\_\_\_\_

Member
(Signature above Printed Name)

Chairman of the Board
(Signature above Printed Name)

Member
(Signature above Printed Name)

**Part 4 VOTER IDENTIFICATION NUMBER (To be filled out by Election Officer)**

CITY/MUN/DISTRICT CODE
[Grid]
Prov Code

PRECINCT NO.
[Grid]

Month Day Year
[Grid] [Grid] [Grid]
DATE OF BIRTH



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City/Municipality of \_\_\_\_\_

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Through: The Election Officer

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I, \_\_\_\_\_,  
*First name/Middle name/Last name*

Filipino, born on \_\_\_\_\_,  
*month/day/year*

\_\_\_\_\_ as recorded in the list  
*(information to be changed or corrected)*

for Precinct No. \_\_\_\_\_, with address at \_\_\_\_\_  
*(Sitio, Barangay, Municipality)*

be changed from \_\_\_\_\_  
*(Present data)*

to \_\_\_\_\_  
*(New data)*

That said change/correction is necessary and valid as evidenced by the attached certification/order of the court.

\_\_\_\_\_  
*(Signature above Printed Name)*

SUBSCRIBED AND SWORN to before me on the above date.

\_\_\_\_\_  
EO/Chairman of the Election Registration Board  
*(Signature above Printed Name)*

COPY FOR THE CENTRAL FILE

**APPLICATION FOR INCLUSION OF RECORDS IN THE BOOK OF VOTERS / REINSTATEMENT OF NAME IN THE LIST OF VOTERS**

Inclusion of VRR in the precinct book of voters       Reinstatement if registered voter whose name has been omitted in the list of voters

**THE ELECTION REGISTRATION BOARD**

City/Municipality of \_\_\_\_\_

Province of \_\_\_\_\_

Through: The Election Officer

Dear Sir/Madam:

I, \_\_\_\_\_, Filipino, born on \_\_\_\_\_,  
*First name/Middle name/Last name*      *month/day/year*

with address at \_\_\_\_\_

a duly registered voter, do hereby request that my name which has been omitted in the list of voters/my registration record which has not been included in the precinct book of voters of Precinct no. \_\_\_\_\_, be reinstated/included therein.

The said reinstatement of name/inclusion of registration record is necessary and valid.

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Name

Grid for Name (Last, First, Middle)

Illiterate Person with Disability

Assisted by: (Please fill-up Assistor's Oath)

Gender Male Female Height Weight

RESIDENCE/ADDRESS Province City/Municipality Barangay House No. / Street

DATE OF BIRTH Month Day Year

CITIZENSHIP By Birth Naturalized Reacquired Date of Naturalization/Reacquisition Certificate No./Order of Approval

PLACE OF BIRTH City/Mun Province

PERIOD OF RESIDENCE No. of Years No. of Months No. of Years in the City / Mun in the Philippines

CIVIL STATUS Single Married Legally Separated Name of Spouse, if married

PROFESSION / OCCUPATION TIN

NAME OF FATHER NAME OF MOTHER Last First Middle

Part 2 OATH

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualification of a voter; that I have no pending application for registration in any city/municipality.

DATE Signature of Applicant EO / Administering Officer

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

Left Thumb Right Thumb

1. 2. 3.

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

Approved/Disapproved Date Reason for disapproval With precinct assignment No. Signatures

Part 4 VOTER IDENTIFICATION NUMBER (To be filled out by Election Officer)

CITY/MUN/DISTRICT CODE PROV CODE PRECINCT NO. DATE OF BIRTH