BI FORM 2014-08-019 Rev 0   This document may be reproduced and is **NOT FOR SALE**

ALIEN REGISTRATION PROGRAM (ARP)

Attach your 2x2 colored photograph **with white background** using permanent glue in the photograph box.

The photograph must be taken within the last three (3) months from the date of application.

A scanned photograph is not allowed. A photograph of the applicant wearing eyewear (i.e. sunglasses, colored contact lenses, etc.) or headwear is not acceptable.

Instructions:

1. Personally accomplish this form using black ink only.
2. Bring your valid passport and Alien Certificate of Registration Identification Card (ACR I-Card) or paper-based ACR.
3. Check the corresponding box of your answer, if applicable.
4. **LEAVE A BOX AFTER EACH NAME.**
5. Do not leave any item blank and write N/A if not applicable. Improperly/ incompletely filled out application form will not be acted upon.
6. If the applicant has **more than four (4) children**, use **BI Form 2014-08-020 Rev 0.**

Registered ☐   Not Registered ☐

Visa Type

ACR I-CARD/ID Number for the Visa

I. PERSONAL INFORMATION

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]   Age   Gender   Country of Birth
M ☐   F ☐

Citizenship/Nationality   Civil Status   ☐ Single   ☐ Married   ☐ Annulled

Passport Number   Civil Status   ☐ Separated   ☐ Widowed   ☐ Divorced

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]   Place of Issuance

Date of Latest Arrival [DD-MMM-YYYY e.g. 01 JAN 1990]   Admission Status

Contact Number in the Philippines   Type of Business

Residential Address in the Philippines
House/Unit No., Street, Subdivision/Village

Residential Address Abroad
House/Unit No., Street, Subdivision/Village

Barangay, Municipality/City   City, State

Province, Zip Code   Country, Zip Code

Position in the Company, *if employed*

Contract Expiration [DD-MMM-YYYY e.g. 01 JAN 1990]   Contract Expiry Date/Valid until [DD-MMM-YYYY e.g. 01 JAN 1990]

Alien Employment Permit (AEP) Number   Monthly Gross Income (Philippine Currency)

C E R T I F I C A T I O N

This certifies that _____, appeared before me with captured biometric data, under SSRN

Number _____ dated_____ at _____.
[DD-MMM-YYYY e.g. 01 JAN 1990]

_____
Registration Officer / Alien Control Officer
(Signature over Printed Name)

ALIEN REGISTRATION PROGRAM (ARP)

II. SPOUSE'S INFORMATION

SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]   Age   Gender   Citizenship
M   F

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

III. PETITIONER'S/EMPLOYER'S/SCHOOL'S INFORMATION

Name of School/Company

SEC Registration/Tax Identification Number   Purpose/Nature of Institution [e.g. commercial, religious]   Contact Number

Name of Authorized Representative

PETITIONER'S INFORMATION (other than for employment / study)   Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Citizenship

Relationship to the applicant

ADDRESS
House/Unit No., Street, Subdivision/Village

Barangay

District

City

Province

Zip Code

IV. PARENT'S INFORMATION

Father's SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

ALIEN REGISTRATION PROGRAM (ARP)

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]	Age	Gender	Citizenship
		M ☐ F ☐	

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

Mother's SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]	Age	Gender	Citizenship
		M ☐ F ☐	

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

IV. CHILD(REN)'S INFORMATION

1. SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]	Age	Gender	Citizenship
		M ☐ F ☐	

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

Spouse's Name [Last Name, First/Given Name, Middle Name]

2. SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]	Age	Gender	Citizenship
		M ☐ F ☐	

ALIEN REGISTRATION PROGRAM (ARP)

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

Spouse's Name [Last Name, First/Given Name, Middle Name]

3. SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]　Age　　Gender　　　　Citizenship
M　　F

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

Spouse's Name [Last Name, First/Given Name, Middle Name]

4. SSRN Number

ACR I-CARD/ID Number for the Visa

Visa Type

Last Name

First/Given Name

Middle Name

Other Name(s)/Alias(es)

1

2

Date of Birth [DD-MMM-YYYY e.g. 01 JAN 1990]　Age　　Gender　　　　Citizenship
M　　F

Country of Birth

Passport Number

Place of Issuance

Date of Issuance [DD-MMM-YYYY e.g. 01 JAN 1990]

Spouse's Name [Last Name, First/Given Name, Middle Name]

Note: If the applicant has more than four (4) children, use BI Form 2014-08-020 Rev 0.

C E R T I F I C A T I O N

　　　I hereby certify that all information provided herein is true and correct to the best of my knowledge and belief, and that any misrepresentation, omission, or falsification of facts may justify denial and cancellation of my application.

_____
[DD-MMM-YYYY e.g. 01 JAN 1990]

_____
Applicant's Signature over Printed Name